

Interpreter Services Coordinating Entity - Spoken
Language

RFP No. 2025HCA2

Amendment No. 4

Date Issued: 12/24/2025

To: RFP Bidders

From: Scott Henderson, RFP Coordinator

Purpose: To respond to bidder questions, amend the Estimated Schedule of Solicitation Activities, and amend Exhibit B, Draft Contract.

This amendment hereby modifies and is attached to RFP No. 2025HCA2. All other terms, conditions, and specifications remain unchanged.

The above referenced solicitation is amended as follows:

1. RFP, Section 1.2 Estimated Schedule of Solicitation Activities is hereby amended to clarify Time Zone as follows

Issue Request for Proposals	November 21, 2025
<div>Pre-Proposal Conference</div> <div>Microsoft Teams Need help?</div> <div>Join the meeting now</div> <div>Meeting ID: 246 419 139 711</div> <div>Passcode: Hj6SW9qC</div> <div>Dial in by phone</div> <div>+1 564-999-2000,,374190650# United States, Olympia</div> <div>(833) 322-1218,,374190650# United States (Toll-free)</div> <div>Find a local number</div> <div>Phone conference ID: 374 190 650#</div> <div>For organizers: Meeting options Reset dial-in PIN</div>	December 9, 2025 – 10 AM PST
Letter of Intent Due	December 12, 2025 – 2 PM PST
Bidder Questions Due	December 17, 2025 – 2 PM PST
HCA Answers Posted*	December 24, 2025 – 2 PM PST
Complaints Due (if applicable) (5 Business Days prior to Proposals Due date)	December 30, 2025
Proposals Due	January 7, 2026 – 2 PM PST
Evaluate Proposals*	January 14 - 28, 2026
Conduct Oral Presentations Round 1, if required	February 3 - 5, 2026
Announce “Apparent Successful Bidder” via WEBS*	February 17, 2026
Debrief Request Deadline (3 Business Days after the ASB announcement)	February 20, 2026

Negotiate Contract	February 21, 2026 - March 31, 2026
Contract Executed	By March 31, 2026
Security Design Review (SDR) Begins*	April 1, 2026
Contract Readiness Period Activities	April – June 2026

*Dates are anticipated and subject to change without an official amendment.

HCA reserves the right in its sole discretion to revise the above schedule at any time.

- Exhibit B, Draft Contract, Attachment 3: Statement of Work, Section 1 and Subsection 1.1, are hereby amended to move Subsection 1.1, Paragraph 2 to Section 1, Paragraph 1, as follows:

1. STATEMENT OF WORK

The Contractor must provide all staffing, hardware, software, administrative services, and any other activities or expenses incidental to the performance of work as described in this agreement.

The Contractor must provide a web-based application to coordinate spoken language interpreter requests directly from Medicaid providers and coordinate payment for services directly to Qualified Interpreters. The web-based application must be able to interface with HCA’s Medicaid Management Information System (MMIS) called ProviderOne (P1), including verifying Medicaid provider and client eligibility and submission of medical claims.

The web-based application must accurately calculate payment for complex interpreter requests, collect and track a wide range of user data and metrics, produce data reports and otherwise meet all HIPAA, security, operational, and performance expectations stipulated in this agreement.

The Contractor must provide pre-scheduled in-person interpreting (IPI), over-the-phone interpreting (OPI), and video remote interpreting (VRI) services with Interpreters who are Qualified Interpreters. The Contractor may only subcontract with Interpreters, who meet the minimum qualifications as defined in this agreement and must have formal, written subcontracts in place with each Qualified Interpreter providing services under this agreement.

The Contractor is expected to conduct regular and ongoing outreach efforts to maintain a diverse pool of Qualified Interpreters subcontracted to provide services through this agreement. The Contractor is expected to conduct regular and ongoing outreach to Medicaid providers and facilities to increase utilization of the ISP.

The Contractor must provide and maintain a dedicated website with content specific to this agreement. The website must include the standard business details, training and user manuals, outreach and education materials, and other relevant information for Medicaid providers and Qualified Interpreters.

The Contractor is prohibited from reassigning an HCA appointment request from an authorized requester to a private status or through Contractor’s private or other contracts. HCA reserves the right to request documentation for any aspect of the work performed under this agreement.

1.1. COLLECTIVE BARGAINING AGREEMENT

By signing this Contract, Contractor acknowledges that HCA is subject to the provisions of the [WFSE, AFSCME Council 28 Language Access Providers Collective Bargaining Agreement \(CBA\)](#), and the Contractor must ensure that all work performed under this contract including Interpreter Service requests are subject to CBA terms, regardless of the modality used and are provided in accordance with such terms. Contractor acknowledges that CBA is updated every two years, and the Contractor is subject to the changes outlined in the successor CBA.

- HCA received the following questions from Bidders and responses are provided in the attachment below.

Remainder of page left intentionally blank. Questions and Answers attachment to follow on next page.

RFP- 2025HCA2 - Interpreter Services Coordinating Entity - Spoken Language	
Bidder Questions	HCA Answers
1. Does the space required to restate each question count toward the maximum page limit for that section? For example, Section 11 (Scheduling Application) in Exhibit C includes approximately one full page of questions to restate and answer, with a maximum of 15 pages allowed for the response. We would like to clarify whether the 15-page limit for this section includes the space needed to restate questions 11.1–11.4.	Per section 3.2 of the RFP NO. 2025HCA2, proposals must restate each question prior to the bidder's response. If the bidder's response exceeds the page limits stated in the RFP, HCA has no obligation to read, consider, or score any material exceeding the stated page limits.
2. Could you please clarify what is meant by "immediately" in section 6.1.1? For example, if client eligibility is verified 5 minutes, 10 minutes or 15 minutes, after the time the request is received, would that be considered acceptable? Is there a specific timeframe beyond which a verification would no longer be deemed "immediate"?	Per Exhibit B, Draft Contract, Attachment 3, section 6 of the RFP NO. 2025HCA2, client and provider eligibility must be verified, at minimum, immediately at the time the request is received and three business days prior to the date of the appointment. The initial client and provider eligibility verification must commence immediately at the time the request is received. Each eligibility verification must be completed in a reasonable timeframe and with a quick turnaround, the specifics of which can be negotiated with the Apparent Successful Bidder.
3. Please confirm that HCA does not expect the vendor to pay the interpreters, but just manage them, so we do not need to include that in the pricing.	The Contractor is responsible for issuing payment directly to Qualified Interpreters. The Contractor is also responsible for the cost of all management of interpreter services. However, in general, the Contractor is not responsible for absorbing the cost of the payments made to Qualified Interpreters and therefore the budget for Administrative Costs does not include Service Costs. For detailed information about the work required under this contract, refer to Exhibit B, Draft Contract of the RFP NO. 2025HCA2. For more information about Qualified Interpreter payment requirements, refer to Exhibit B, Draft Contract, Attachment 3, section 11 of the RFP NO. 2025HCA2.
4. Is this a new requirement, or is there already an incumbent providing these services? If an incumbent exists, does their current solution already include all of the features and capabilities the State is requesting?	This is not a new requirement. The Health Care Authority (HCA) currently contracts scheduling and billing software and administrative services to manage requests for prescheduled in-person interpreting (IPI), over-the-phone interpreting (OPI), and video remote interpreting (VRI) by Qualified Interpreters for spoken-language requests. As stated in section 1.3 (Purpose and Objectives) of RFP No. 2025HCA2, the Interpreter Services Program is operating statewide under two contracts with one (1) Contractor. These contracts are expiring and must be competitively solicited. The Interpreter Services Program is seeking a vendor that can meet all requirements outlined in Exhibit B, Draft Contract of this solicitation. Current contracts, including Contracts K2474 and K4724, are published on the HCA Interpreter Services webpage under Resources.
5. Cost Proposal should only include our Administrative Costs, correct? It should not include estimated Service Costs (Qualified Interpreter Service Payments), correct?	The Contractor is responsible for issuing payment directly to Qualified Interpreters. The Contractor is also responsible for the cost of all management of interpreter services. However, in general, the Contractor is not responsible for absorbing the cost of the payments made to Qualified Interpreters and therefore the budget for Administrative Costs does not include Service Costs. For detailed information about the work required under this contract, refer to Exhibit B, Draft Contract of the RFP NO. 2025HCA2. For more information about Qualified Interpreter payment requirements, refer to Exhibit B, Draft Contract, Attachment 3, section 11 of the RFP NO. 2025HCA2.

6. Since the Administrative Costs will be a fixed cost per year, will the Coordinating Entity bill HCA in equal monthly payments regardless of the volume of business per month? For example, if the annual Administrative Costs submitted for the Cost Proposal were \$1,800,000, would that mean the Coordinating Entity would bill HCA \$150,000 per month for those Administrative Costs?	The total payment for Administrative Costs will be a fixed amount each year regardless of business volume. Payments for Administrative Costs can be billed monthly, and the exact payment cadence for Administrative Costs can be negotiated with the Apparent Successful Bidder.
7. Please clarify, will the Administrative Costs and the Service Costs (Qualified Interpreter Service Payments) be billed to HCA separately each month? If so, could you explain in some detail how that would work?	The total payment for Administrative Costs will be a fixed amount each year regardless of business volume. Payments for Administrative Costs can be billed monthly, and the exact payment cadence for Administrative Costs can be negotiated with the Apparent Successful Bidder. Service Costs are billed to the Health Care Authority through the ProviderOne system. The billing for Service Costs must adhere to the requirements stipulated in Exhibit B, Draft Contract of the RFP NO. 2025HCA2, including under Attachment 3, section 11.
8. In Exhibit D on page 1. letter A. Cost Proposal Information, is the difference between Interpreter Requests and Completed Appointment/Request equal to the number of cancelled appointments? For example, for IPI 569,851 (Interpreter Requests) - 270,215 (Completed Appointment/Request) = 299,636. What does 299,636 represent?	Interpreter Requests include all requests submitted to the program that are not completed, as defined in Exhibit D, Cost Proposal of RFP No. 2025HCA2. A Completed Request is defined in Exhibit B, Draft Contract of RFP No. 2025HCA2 as a request in which the client, Qualified Interpreter, and provider were all in attendance and interpretation services were provided. Additional definitions and data details are published on the Interpreter Services Data Dashboard on the HCA Interpreter Services webpage which has additional definitions and data details.
9. Are both the Administrative Costs and Service Costs (Qualified Interpreter Services Payments) funded by Medicaid or is it only the Service Costs that are funded by Medicaid?	Per section 1.3 of the RFP NO. 2025HCA2, Administrative Costs and Service Costs incurred by the Interpreter Services Program are eligible for Federal Financial Participation (FFP) through the Centers for Medicare and Medicaid Services and are funded by state and federal Title XIX matching funds under the Social Security Act.
10. Exhibit B Draft Contract.docx - page 45, 1.1 Collective Bargaining Agreement, last paragraph in section indicates Contractor must provide all hardware. Considering this is listed under the CBA, we wanted to confirm whether this included supplies for the linguist, such as headsets, phones, cameras, etc. Or the linguist must provide that themselves and the contractor only provides necessary supplies tied to the administrative functions?	Per Amendment No. 4 of the RFP NO. 2025HCA2, the last paragraph in Exhibit B, Draft Contract, Attachment 3, section 1.1 has been moved to Attachment 3, section 1. The Contractor must provide all staffing, hardware, software, administrative services, and any other activities or expenses incidental to the performance of work as described in the contract. Per section 1.3 of the RFP NO. 2025HCA2, interpreters who complete work under this contract are independent contractors. Independent contractors are responsible for supplying their own hardware, equipment, and supplies needed to perform work under this contract.
11. Exhibit B Draft Contract.docx - page 55, 4.1.12 Modality (IPI, OPI, VRI) vs 4.1.19 Type of Service. Ensuring we understand the definitions correctly, these would both have the same info in them but both need recorded?	"Type of Service" is defined on page 55 of Exhibit B, Draft Contract, Attachment 3, section 4.1.19, as the term used to describe the modalities of interpreting in the Contractor's scheduling and coordinating system. Modalities, including in-person interpreting (IPI), over-the-phone interpreting (OPI), and video remote interpreting (VRI), are addressed on page 55 of Exhibit B, Draft Contract, Attachment 3, section 4.1.12. There may be instances where modality and type of service data would need to be displayed and recorded separately within a required report.
12. Can we use partner agencies to fill appointments of lesser diffusion?	The Contractor is prohibited from reassigning an HCA appointment request submitted by an authorized requester to a private status or through the Contractor's private or other contracts, as stated on page 44 of Exhibit B, Draft Contract, Attachment 3, Section 1. The Contractor may only use Language Access Providers and must have a written subcontract and business associate agreement as

	described in Exhibit B, Draft Contract, Attachment 3, Section 10.
13. In rare occurrences when no interpreters are available for an IPI appointment, is offering OPI appointment acceptable?	If an HCA in-person interpreting (IPI) request is not filled, a provider may submit a new request for a different modality, provided the request meets the definition of a Pre-Scheduled Request, as defined on page 13 of Exhibit B, Draft Contract, section 2. The Contract requires the Contractor to send notifications to requesters for requests that remain pending or unfilled, as specified on page 69 of Exhibit B, Draft Contract, Attachment 3, section 5.5 to support timely fulfillment of requests.