

Written Translation Vendor Information

Chart A: DMMA Department Names and Location Codes:

Location/Department:	Location Code:
Central Intake Unit (CIU=248)	248
Medicaid Call Center (MCC=622)	622
Policy & Planning Unit (PPU=778)	778
Training (TRA=872)	872
Operations Administration (OpAdm=67236)	67236
PAS Kent/Sussex Team (PASKC=72757)	72757
PAS NC Team (PASNC=72762)	72762
Adams SSC Pool 920	920
James Williams SSC Pool 335	335
Milford SSC Pool 131	131
Milford SSC Pool 520	520
Robscott Building Pool 031	031
Robscott Building Pool 230	230
Shipyards Center Pool 211	211
Shipyards Center Pool 235	235
ASSIST Pool 430	430
Prides Crossing Pool 750	750

Chart B: Service Procedures:

Type of Service:	Vendor:	Procedure:
Written Translation	Accurate Language Services	<p>Email your request to: translations@accuratelanguageservices.com</p> <p>Information needed to provide:</p> <ul style="list-style-type: none"> Organization: DMMA Department name (<i>see Chart A</i>) Program Code will be: Medicaid 62 Language needed Nature of the assignment (Mass Mailer/ Notice/ Member Correspondence) Need date/timeframe Copy of Document needing translation <p>You will receive a quote to review and approve</p> <p>Forward the quote to: DHSS_DMMA_Accounting@delaware.gov to secure a PO#</p> <p>Sign, Date, add PO# to quote and send it back</p>
	Back to Basics (SJB Capitol Group)	<p>Email your request to: request@backtobasicslearning.com</p> <p>Subject Line: "Client ID 18062 Document Translation Request"</p> <p>Information needed to provide:</p> <ul style="list-style-type: none"> Organization: DMMA Location/Department name or code (<i>see Chart A</i>) Program Code will be: Medicaid 62 Language needed Nature of the assignment (Mass Mailer/ Notice/ Member Correspondence) Need date/timeframe <p>Attach document needing translation</p> <p>No Quotes. Just monthly invoices.</p> <p>Turn around time for small documents 24-48 hours</p>
	Corporate Translation Services (Language Link)	<p>Email your request to: Quotes@language.link</p> <p>Information needed to provide:</p> <ul style="list-style-type: none"> Organization: DMMA Location Code (<i>see Chart A</i>) Program Code will be: Medicaid 62 Language needed Nature of the assignment (Mass Mailer/ Notice/ Member Correspondence) Need date/timeframe Copy of Document needing translation <p>You will receive a quote to review and approve</p> <p>Forward the quote to: DHSS_DMMA_Accounting@delaware.gov to secure a PO#</p> <p>Sign, Date, add PO# to quote and send it back to Quotes@language.link</p> <p>You will receive a confirmation from the PM Team at Language Link.</p> <p>If you do not hear back from them within 1-2 business days, please contact them again.</p>

<p>Language Training Center, Inc. (LTC Language Solutions)</p>	<p>You will receive your finished translation from the PM Team.</p> <p>Email your request to trpm@ltcls.com</p> <p>Information needed to provide:</p> <ul style="list-style-type: none"> Organization: DMMA Location/Department (<i>see Chart A</i>) Program Code will be: Medicaid 62 Language needed Nature of the assignment (Mass Mailer/ Notice/ Member Correspondence) Need date/timeframe <p>Attach document needing translation</p> <p>You will receive a quote from Translation Project Manager to review and approve</p> <p>Forward the quote to: DHSS_DMMA_Accounting@delaware.gov to secure a PO#</p> <p>Sign, Date, add PO# to quote and send it back to the Translation Project Manager</p> <p>Time frame is specified on quote.</p>
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