

## **FLS - REQUESTERS BILLING REQUIREMENTS FOR INTERPRETERS\***

1. We do not deny to bill, but we do not guarantee the payment for the past due or incomplete vouchers, the voucher without the Control Number given to you by FLS staff, or if any of service requester's requirements are not met.
2. The Encounter Record/ASCR (Interpreter Voucher) must be completely filled out (printed or typed). Incomplete or altered forms will not be paid! You and the requestor must sign each of your vouchers (except late cancel.-see #8). The errors in forms/vouchers must be crossed over (not white-out) and initialed by the requestor.
3. Unless you were late, always claim the "requested arrival time for interpreter" as a "service start time" and not an actual appointment' start time. We are billing for the interpreting service, and not for the requester/provider's services!
4. Hopelink accepts only the Hopelink Voucher, DSHS – DSHS SS Interpreter Appointment Record, Aging & Disability Services (home visits), Evergreen Healthcare (in Kirkland) and some clinics of HealthPoint and Neighborcare Health provide their own vouchers at the place of appointments, and do not pay if you use the wrong form/voucher. For the jobs other than listed above you can use FLS Interpreter Voucher. All of the forms are available at [www.flincorp.net](http://www.flincorp.net).
5. Send your vouchers to FLS office within 7 days of the assignment date in order to be paid by the requester.  
Exceptions: Hopelink vouchers for the end of month jobs must be returned by the 2nd business day of the next month.
6. You have to mail or bring to FLS office the original signed vouchers for each FLS assignment, including all no-shows and cancelled appointments. Otherwise, it will be considered as your own no-show. You must keep the copies of your vouchers for 6 years in case of IRS, DSHS or other audits, billing discrepancies or loss.
7. For Hopelink MEDICAL APPOINTMENTS of more than 1-hour 45min., [which will be billed as 2 hours or more] provide a detailed explanation in the Backup Documentation Form along with your signature and requester initials.
8. Per Hopelink: appointments at the same address/facility with less than 31 minutes in between are considered to be consecutive (even if they were given to you by different agencies), and will be paid for the actual time spent on each appointment. Please check Hopelink Billing Regulations and Samples from H-k-FLS Contract 3-1-05, on FLS website.
9. The client/patient/provider no shows and same day cancellations (received from Hopelink staff by FLS in less than 4hr) are paid at the rate of 30 min. Exception: client no-show for Belltown CSO are paid for 1hour.  
To be paid and to avoid charges (\$15 minimum) you must inform FLS staff about each client/patient or provider no-show on the same day (email and/or call) and to get a confirmation number from FLS. You must submit a signed by requester voucher for each no-show. For provider late cancellation (if you were not there) send us a voucher with your signature only. Unconfirmed client/patient/provider no-shows/interpreter replacements are not paid by Hopelink.
10. Cancellation of DOC, BIIA, DSHS (non Hopelink jobs) made within 48 hours (2 days) will be billed as "Late Cancel."
11. For mileage reimbursement from Hopelink (incl. client/provider no-shows) you must fill in the street addresses for origin and destination on your voucher and submit a printout from [www.mapquest.com](http://www.mapquest.com) proving that each way (to or/and from your assignment) was 10.1 ml or more. You must provide your current driver license, car registration and insurance prior to billing Hopelink for mileage. You must not bill for roundtrip mileage if drive from and to other than FLS assignment. DOC, BIIA, DSHS social services (non Hopelink jobs) and other State Agencies/Divisions reimburse mileage for roundtrips over 30 miles. Most private requesters do not reimburse mileage. We might bill the requestors on your behalf with your printouts from Internet, but we do not guarantee the payment. Mileage flat billing fee of \$2 will be applied to each mileage reimbursement claim. Please check 2011 Mileage Deduction For Business (Freelance Interpreters) on FLS web how you can deduct all of your business mileage at \$.51/ml/IRS 2011 rate on your tax return.
12. For parking reimbursement from Hopelink you must submit the original receipts. Please always keep the copies.  
Parking for Pike Market Medical Clinic: FLS interpreters will be given \$5 parking stickers for parking up to 2 hours in the Market Parking Garage when they turn in their vouchers for services to the Front Desk Receptionist at clinic.
13. The fee for each un-billable assignment caused by interpreter: no-show or job returns without referred by you equal replacement in less than 48 hours within regular office hours M-F 8am-6pm, incomplete or submitted late paperwork is \$25. The fee for 3 incidents within 30 consecutive days is \$100.
14. Unless you provide us a completely filled W-9 form, we must withhold 28% of your earnings per IRS section 6109 regulations. W-9 form/instruction is available at the FLS website. If you move, you must submit a new W-9 form.
15. We provide a payment via direct deposit to your bank account for FREE. If you prefer to be paid by checks via mail, please be advised that you have to pay \$30 bank fee for each lost check cancellation in order to get a duplicate.
16. Keep your records in order. We may incur the fee for inquiries on already paid to you vouchers, copies of the paystubs, and other records. Billing discrepancies must be emailed with control numbers to [4billing@flincorp.net](mailto:4billing@flincorp.net) within 7 days of receiving your payment.
17. For Hopelink jobs in January, you'll be usually paid by the end of March etc., court & private jobs - in 1-1.5 months.
18. Updating expired documents required by DSHS & Hopelink is your responsibility. We may charge you the service fee for multiple reminders to do so.
19. **THE PAYMENT IS ISSUED BY THE END OF THE MONTH ONLY FOR THE ASSIGNMENTS ALREADY PAID BY REQUESTER!**

\*To comply with the requesters' policies FLS reserves the right to change this document.

Please check FLS website [www.flincorp.net](http://www.flincorp.net) for updates, forms and additional info.

I have read and understood this document.

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Name of Interpreter (first, last)

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Signature of Interpreter

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Date