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State of Hawaii – Dept. of Human Services
Med-QUEST Division



Today's Date

Keej Nōmba: _____
Talboon No: _____
Fax Nōmba: _____



RE: MEDICAL ASSISTANCE ELIGIBILITY RENEWAL FORM – N14

Yokwe,

Eñin ej pepa eo kwonaj aikuji nan eligibility renewal. **Jouij im etale aoleb melele kein ijin ilal, im kōmman kajjimwe im bar kobaiki waj aolep melele kāāl ko im uuwaki aoleb kajjitōk kein ilo pepa in.**

Medical assistance eo am enaj maron bōjrak ne ejab dedelok renewal ilo rāān eo emōj kajjjete ijin ilal.

Kwōj maron kōmmane renewal eo am ilo juon ian wawen kein:

- *Kūr tok kōm nan renewal eo am ilo telboon.*
- *Kadede lok pepa eo am, jaini im kōrol tok an kōm ilo lōta, email ak fax.*
- *Itok nan juon ian obij ka am im kadede renewal eo am.*

Lale aolep melele ko ilo **Forms Instructions Section** ilo jemlok in kōjela in nan am naj bok melele ikijen am naj maron kōroltok renewal pepa in am.

Raan Eo Aikuj Tobark Tok: Kōrol tok pepa in renewal pepa in am ak kūr tok kōm nan jiban mokta jen

Section A Melele ikijen Jikin Jokwe eo Am:

Aet Jab

 A1. Kwoj kōnan ke kabōjrak jiban in ejmour ko jen Med-QUEST nan **AOLEP ro re jokwe ilo mweo imōm.**

Ne, aet, jouij im lajrak e etaer ijin: _____, innem etal na Section F.

Aet Jab

 A2. Melele Ko Nan Maron Tobar Eok: Ewor ke oktak ilo etam ak atrej eo (jikin jokwe im/ak jikin jilkin waj lōta), ak telboon nōmba, email atrej?

Melele Ko Rekāāl Tata	Janij Nan
Etam:	
Atrej in Jokwe:	
Atrej in Jilkin waj lōta:	
Talboon Eo An Mweio:	
Cell Talboon:	
Talboon Nan Jikin Jerbal:	
Email:	

Aet Jab

 A3. Oktak ko Ilo Jikin Jokwe Eo: Ewor ke oktak ikijen aolep ro rej uuwan jokwe jikin jokwe eo?

Ijin ilal ej nan kwalok ewi karkarin aolep ro rej uuwan jikin jokwe in. Ne ewor karkar ko rej lajrak ijin ak rejab jimmwe, jouij im jere lok im je waj jimmwe in karkar eo ekar nan kain karkar kein rej lajrak ijin. Ne ejanin kar je karkar eo, jouij im je waj karkar eo ejimwe.

*Kobaiki tok etan ro uuwan jikin jokwe eo am im ejelok etair ilo ijin emoj kalikar.

Ne ejanin wōr oktak, jouij im etan nan kajitōk, A.4

Kain Karkar Ko:

- Drimare
- Bubu/Jimma
- Bōk edorin
- Mañdren ledrik/Mañdren Ladrik
- Ro Rej Koba
- Ajiri Eo Jibur
- Jein/Jatin (koba ro nejin eo ej kab koba tok ilo paamle in)
- Karkar ko jet paamle eo an eo kwoj mare iben)
- Ak rejaninMare
- Foster Jinen/Jemen
- Rūkorae/jino
- Ejab Nukum
- Jinen/Jemen (Koba eo ej kab itok in belele)
- Foster Ajiri
- Rilik
- Ajiri(Ekoba ajiri ro rej kab koba tok ilo paamle in)

{Etam } Ewi Karkarim
{Etan Armij Eo Nukum} {Ewi Karkar In amiro}

Juon Waan Jonak:

John Doe's Karkar eo an nan
Jane Doe Drimare
Mary Doe Jemen (eo ej kab belele iben jinen ak jemen)
Steve Doe Jemen (eo ej kab belele iben jinen ak jemen)
David Doe Jatin (eo ej kab koba tok ilo paamle in)

Aet Jab

If there are changes to your household please use chart below to update information.

UUWAN JIKIN JOKWE EO IM EMOJ JOLOK AK KABŌJRAK JIBAN KO AN			
Etam	Ta unin(Kōmeleleiki ijin ilal)	Raan eo ear jemlok	Jiban ko rar Bōjrak
			<input type="checkbox"/> Aet <input type="checkbox"/> Jab
Waan Joñak ikijen ta unin kōmakit eo uwaan jikin jokwe eo			
Emakit (Ilowan wot State ak riwōjlok jen State. Ne ewōr Atrej kāāl, jouij im letok)	Ber ilo jikin kalbuuj ak Hawaii State Hospital	Jebel ak jolok an drimare eo an	
<i>mij</i>	Jokwe ilo imon dritto ro ak Community Care Foster Family Home	Bar wūn ko jet (jouij im kōmleleiki)	

NE EWOR UUWAANJIKIN JOKWE NE EKĀĀL : Ne kwonaj aikuij in bar kobaik waj juon armij nan jikin jokwe ne am, jouij im kōmman kabe in paj in im paj ne juon ak kobaik waj bar juon pepa im uwaaki kajitok kein nan kajojo ro kwoj kobaik tok er im kūr tok Customer Service at 1-800-316-8005 (TTY: 711 or 1-800-603-1201) ne kwonaj aikuij jiban:

Etan Armij Eo Ekāāll (Etam, Mitōl, Laj Naim, ne ewōr titōl)

Ne ej kab lotak armij in, jouij im letok etan jinen im jemen ijin ilal:

Etan Jinen:

Etan Jemen:

Kwoj kanne pepa in kajitok Medical Coverage? AET JAB Medical Services

Kwonain ke kar bok jiban jen Medical Service iumin ran ko 90 remotlok? AET JAB **Ne aet, ran ta:**

Eman Ke Kora

Raan in Lotak

**Social Security Number

****Ej aikuj in wor Social Security number (SSN) nan ro rej kajeon in bok jiban (ekoba ajiri) jen *Medical assistance*. Kōm maron kir jikin jokwe eo am ne kōm aikuij in bōk bar jet melele ko kōmij akuji. Jiban kein remaron rumij lok ne ejjab tōbrak aolepen kajitōk k im melele ko kōmij akuji. Ne kwōnaj aikuij jibañ in kōmman SSN ak kōkàl SSN card, kūr 1-800-772-1213 ak iwoj nan weibjait eo an socialsecurity.gov.**

TTY kūr 1-800-325-0778

Drimare? <input type="checkbox"/> AET <input type="checkbox"/> JAB		Ne aet,, Etan :		
Jete wonāām ilo juon yio (koba eowoj im im bōk ko jet):				
Kwoj lomnak ke in kane pepa in eowoj iben kien? <input type="checkbox"/> AET <input type="checkbox"/> JAB kwoj kanne iben eo driturum ke? <input type="checkbox"/> AET <input type="checkbox"/> JAB				
Kwonaj ke kobaik ro kwoj bok edoier? <input type="checkbox"/> AET <input type="checkbox"/> JAB				
Etan(s) ro kwoj bok edoier ilo tax				
Renaj be ber ilo tax edo ko an ar juon armij? <input type="checkbox"/> AET <input type="checkbox"/> JAB				
Ne aet: Etan armij enaj likit er ilo tax edo ko an			*Karkar in:	
Armij in ekāāl ej bōroro ke? <input type="checkbox"/> AET <input type="checkbox"/> JAB Enaj kolotak nat:			Jete arjiri enaj lotak:	
Kwoj ke juon U.S. Citizen/National? <input type="checkbox"/> AET <input type="checkbox"/> JAB				
Ne jab, ewor ke an maron inbok pepa an imokrajen? <input type="checkbox"/> AET <input type="checkbox"/> JAB				
Raan in Drelontok _____		Alien or I-94 No. _____		
Immigration Ta kain pepa ro ko a (i.e. I-551, Visa, etc.):		Ewi jokjok pepa kein an		
Etan ilo an walok ilo immigration doc. pepa ko an				
Passport Nōmba ak bar kaat nōmba ko jet				
SEVIS ID ak raan eo ej jemlok(jab likiun aikuij)		Category Code		
Ta pepa in ej kōnke ekāāl tok juon armij nan edo ilo tax ekoba tok iben aolep ro rej ber ilo edo ko an taxes ilo jikin jokwe eo.? AET <input type="checkbox"/> JAB				
Ne Aet, Jouij in lajrake etan aolep ro rej jokwe imweio im im ber uwmin edo in tax ko am.				
Lajrak Ijin Ilal Ej Kwalok Karkar Ko Ilo Jokwe Eo (Ekoba eo kab itok im belele iben jinen/jemen):				
• Drimmare	• Jinen/Jemen	• Ajiri	• Jein/Latin	• Bok Edo in
• Jibun Jiman	• rūkorea/jino	• Mañdre ledrik/ Mañdre ladrik	• Relik	• Ajiri eo jibun
• Foster Jinen/Jeman	• Foster Ajiri	• Koba ak janin mare	• Ejab nukum	
• Nukun ko jet (jouij im kōmelele)				
Ta karkarin armij in ekāāl nan armij eo an pepa in im jenaj kūrī? (*lalemelele kani ilo pepa ne juon.)				
Ne ebar wōr uwaan jikin joke in, (ro rej jokwe ilo atrej in ej lajrak) jouij im lajrak e etaeir im ewi jonan aer kāāl tok *im karkarier:				
Aolep ro ilo Mweio:		Karkar an ro rekāāl tok:		
1.		1.		
2.		2.		
3.		3.		
4.		4.		
5.		5.		
6.		6.		
Ne elon lok jen (6) armij ilo mweio kōmman kabe in paj in im kadedelok im kobaik tok.				

Aet Jab

 A4. Tax Kane Pepa In Ewoj: Ejimmwe ke melele ko ilo tax in? Ne ejab jouij im kōmman kajimmwe.

Etam (Etam ,Mitol, Middle, Laj naem, Suffix)	Kwoj kanne jenolok ak iben Dron
Ewor ke en kwon likōti in bok edoin ilo tax? <input type="checkbox"/> AET <input type="checkbox"/> JAB	Etan Armij eo driturum (Etam, Mitol, Laaj Neim, Mr/Mrs)
Etan ro kwoj bok edoier ilo tax:	
Ewoe ke en ej je eok im bōk edoier ilo taxes? <input type="checkbox"/> AET <input type="checkbox"/> JAB	
Ne kwōj juon rekanne tax pepa ak bar juon ej je etam ke kwoj juon eo ej bok edoim:	

AET JAB A5 Jonnan Kōlla Ko AN Mweio **Ne ewōr oktak ko ilo melele ijin ilal kobaik tok paj ko emoj kōmman janij ie.** (((Nan waan jonak, letok lajrak in kōlla ko am iumin allin ko jilu remotlok) Ne kwar jerbak **nan kwe make**, jouij im letok pepa ko re kwalok wawen am kōlla.

Etam	Ijo Ej Itok Am Kōlla Jane	Wonam Ilo Juon Allin	employer/*Self- Employment	Ran Eo Kwar Jino	Ran Eo Kwar Bōjrak
Janij Nan					
Janij Nan					

* Jolok Wonen eo ear kōjerbale nan self-employment Biijnef eo am jen repot an juon allin in ijin ilōn.

Aet Jab

 A6. Kwar ke ak ewor ke ilo mweio imōm aer ber ilo jorran eo me bar juon armij ear bōk edo in kōlla wonāān am takto? Ne aet, kōm naj kūr eok..

Wōn eo ear Jelet Er	Raan In Jorran Eo	Wōn eo Enaj Bōk Edo/Insurance Kombani

Aet Jab

 A7. Ewor ke ilo mweio imōm ej bok jiban jen jiban in ejmour ko ijelokinin. (Medicaid (QUEST Integration)?)

Etam	Health Insurance Carrier/Plan	Policy ID	Raan In Jino	Raan in Jemlok

Section B

Aet Jab

 B1. Ewor ke ilo mweio ej dritto lok 65, yio im ebilo ak disabled? Jouij im etale ne melele kein ijin ilal rejimmwe. Ne ejab, jouij im kōmman kajimmwe.

Etam (Etam, Mitöl, Laj Neium)	Bilo/Disabled	Yio 65 ak drittölol	Ej Bok SSI	Medicare
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Etal jen SECTIONS C, D, AND E NE EJELLOK UJWAN MWEIO EAR:



- 65 yio im dritto lok
 - Rej bok Supplemental Social Security Insurance (SSI) Jiban ko
 - Ak bok jiban ko ikijen an disability im/ak
- Nbök jiban Medicare A/B ak bok jimor

Section C:

Aet jab

C1. Ewor ke ilo mweio ear wör oktak ilo akkaun ko an ilo bāän ak, 401K, jítak ko an, ak men ko jet)?

Jouij im kōmman oktak ijin ilal. * ak belan ko ilo 1 ran in allin in

Etam	Ej Itok Jen la Jāän In	Ran in Ej Oktak	*Jete Orran Kio

Section D:

Aet Jab

D1. Ewor ke am ak ro ilo mweio braberty ak Imöm?

Etan Armij An	Atōrej Eo
Jete Wonāän Kio	

Aet Jab

D2. Ewor ke am an ro annuity?

Etan Armij Eo An	Raan Eo Ear Bōke	Atōrej Eo AN Annuity Kombani

Aet Jab

D3. Ewör ke am ak ro ilo mweio, mortgage ak promissory noot?

Etam eo Ewor AN	Raan Eo Ear Ijino	Jete Eo Ear Jino Kake	Jete Bwe Ne Kio

Aet Jab

D4. Ewör ke am ak ro ilo mweio elon aer life estate interest ilo mweio ak business ro an bar juon armij?

Etam Armij Eo An	Raan Eo Ear Jino	Atōrej eo	Jete Eo Kwar Kolla

Aet Jab

D5. Kwar ke ak ro ilo mweio rar kolla wonāän drelon ilo Continuing Care Retirement Community (CCRC) ak Life Care Community (LCC)?

Etan Armij Eo	Raan Eo ear Jino	Etan im Atōrej eo CCRC/LCC	Jonan Eo Ear Kōlla

Section E Long-Term Care Services

Aet Jaab

- E.1** Ewōr ke ro ilo mweio rej bōk jibañ ilo ak ej aikuj Long-Term Care jibañ ilo mōn Nursing Home, Adult Foster, ilo mweio imōm, Assisted Living home ak Retirement/Life Care Community?

Etan armej ro: _____

Etan armej ro: _____

Aet Jaab

- E2.** . Kwaar ke im/ak eo pāleem wia kake, jānij, ak aje property ak mweiuik ko jet—ekoba jāān—ilowaan wōt 60 allōñ ko? Ak, kwaar ke im/ak eo pāleem kōmman leak ko ñan juōn trust ilowaan wōt 60 allōñ ko remootlok?

Etam	Mweiuik Ta Eo	Wūnin	Transfer Raan	Aurōkin	Joñan eo Kwaar Bōke

Section F Oktak ko Jet

Aet Jaab

- F1.** Ewōr ke oktak ko jet kokōnaan ripoote? *Ñe kwōj ripoote oktak ko jet, jouj im kobaik peba in kamool ko.*

JOUJ IM JAIN IM KAROOL PEPA IN ÑAN KŌM IKIJEEN mail, email, fax ak itok ñan wōpij eo.

KEMEMEJ: Komaroñ bar kooltok ñan kamōje renewal eo am ilo talboon eo.

Etale PEBA IN KILEN KANNE ñan loe tipdikin.

Ij kamool bwe aolep melele ko iaar likūti ilo recertification peba in rej mool im ekkar ñan aō jelā. Ñe iaar make kōmman riap ilo aō jelā ilo peba in, Imaroñ prosecuted iumwin Hawaii Revised Statutes §710-1063. Ilo aō jaini, ij lelok melim ñan kamoole melele kein, ñan kobaik melele ko jen jikin jāān ko. Ij lelok melim ñan State of Hawaii ñan etali melele ko iaar jei. Emōj aō kar riiti ak raar riittok ñan eō laajrak in jimwe im eddo ko aō ilo pāij eo eliktata me imaroñ bōke ibba bwe en aō naan in melele.

Primary Contact/Beneficiary/Authorized Representative Signature:	SSN	Raan (mm/dd/yyyy)
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ÑE EWŌR RO ILO MWEIO IMUM REJ 65 IIŌ AK RITTOLOK, KUN AN LAAŌ AK DISABLED, ARMEJ EO IM EO PĀLEEIR

EJ KANNE (i.e. ritto ro rej bed ilo mweo imōn im kwoj likit ir ilo tāj (tax) eo am) JAIN ITULAL

Kein melim in enaaj jemlok ñe aō/arro peba in kanne ñan Medicaid ejjab le, ak Ña/kōjro ejjab teru ñan Medicaid, ak ñaij/kōjro jolok melim in ilo jeje ñan wōpij eo Department of Human Services. SEC 1137(a) ilo Act.

Armej Ro Jet Ilo Mweio: Jain:	Kadkad ñan Applicant/Beneficiary	SSN	Raan(mm/dd/yyyy)
	*PĀLEEM		

Kommool kōn am bōk iien im jej reimaanlok ñan jibañ eok!

PEBA IN KILEN KANNE**WŪN:**

Peba eo DHS 1100B-2 Medical Assistance Eligibility Renewal, naaj kajerbale āinwōt peba eo juōn N-14 Renewal Kōjjelā. If in the event aÑe ilo juōn wāween peba in N-14 Renewal Kōjjelā ejjab maroñ kajerbale, peba eo DHS 1100B-2 naaj bōk jikin peba in.

KILEN:

Peba in enaaj kamōjlok kanne jen Primary Contact ak Authorized Representative.

Ñan Primary Contact:

Ñe aikuj jikin ñan kamōje aṃ kanne peba in, jouj im koba bar juōn peba ippān peba in kōkāā in. Section A.-F. kālet Aet ak Jaab ilo book eo im uwaak kajitōk ko.

PRIMARY CONTACT SIGNATURE:

Primary Contact eo ej aikuj jain jikin in im kalikar melele ko aikuji. Ilo aṃ jaini ej kammool bwe melele ko kwar likūt ilo peba in recertification in ej mool im jimwe ekkar ñan jelā eo aṃ im lelok melim ñan State of Hawaii ñan kajerbal kein jermal ko aer ñan kamoole iumwin Hawaii Revised Statutes §710-1063.

Jouj im kanne im kajeplaak peba in im juōn kape in authorized representative peba eo ñan address eo kar laajrake ilo pāij 1 in peba in ak Eligibility Branch Office eo epaak eo (lal itulal). Komaroñ barāinwōt kūrlok Customer Service at 1-800-316-8005, (TTY/TDD 711) ñan kadedelok aṃ kanne peba in renewal ilo talboon eo.

Statewide	<p style="text-align: center;">Med-QUEST Eligibility & Enrollment Service Centers 1-800-316-8005 (Phone) 711 TTY/TDD (Available to deaf, hearing, and speech impaired) 1-800-576-5504 (Fax) MQDCustomerSupport@dhs.hawaii.gov (Email) P.O. Box 3490, Honolulu, HI 96811-3490 (Mailing)</p>
HAWAI'I	<p>Hilo Service Center 1404 Kilauea Avenue, Hilo, HI 96720</p> <p>Kona Service Center Lanihau Professional Center, 75-5591 Palani Road, Suite 3004, Kailua-Kona, HI 96740</p>
KAUA'I	<p>Kaua'i Service Center Dynasty Court, 4473 Pahee Street, Suite A, Lihue, HI 96766</p>
MAUI	<p>Maui Service Center (Maui County)</p> <p>Maui Millyard Plaza, 210 Imi Kala Street, Suite 101, Wailuku, HI 96793 Moloka'i State Civic Center, 65 Makaena Street, Room 110, Kaunakakai, HI 96748 Lana'i 730 Lana'i Avenue, Lana'i City, HI 96763</p>
OAHU	<p>Oahu Service Center</p> <p>Honolulu 1350 South King Street, Suite 200, Honolulu, HI 96814 Kapolei 601 Kamokila Boulevard, Room 415, Kapolei, HI 96707 Waipahu 94-275 Mokuola Street, Suite 301, Waipahu, HI 96797</p>

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JIMWE KO AŃ NĀN KAJITŌKE JUŌN ADMINSTRATIVE HEARING

TA IN ADMINISTRATIVE HEARING (“hearing”)? JuŃn hearing ej kilen Ńan etale wŃnin kĀlet eo an Department’s nae case eo aŃ im aikuj kajitok iumwin wŃt 90 raan ko jen raan in peba in kŃjela in. JuŃn hearing officer eo ear jab bŃk kunaan ilo kŃmman ko an Department’s enaaj bar etale melele ko ilo case eo aŃ. Ńe hearing officer eo ej loe bwe Department ear kŃmman bŃd, Department eo enaaj kŃmman jimwe ko. HAR 17-602.1-3 to 4; 17-602.1-6; 17-602.1-24; 17-602.1-26; 17-602.1-28; 17-602.1-37; 17-1703.1-2 to 4; 17-1713.1-2

WŪNIN NĀN KAJITŌK JUŌN HEARING:

- KwŃjjab errĀ ippĀn pepe eo kar kĀlete ilo application ak case eo aŃ.
 - Kar jab etale application eo aŃ ilo mŃkaj: 30 raan ko Ńan juŃn SNAP; 90 raan ko Ńan medical assistance Ńan bŃk jibaŃ Ńe ewŃr aŃ disability; 45 raan ko Ńan bŃk jibaŃ ikijeem jĀĀn ak medical assistance application ko jet.
- HAR 17-602.1-4; 17-602.1-24; 17-647-3; 17-647-7; 17-647-14; 17-1711.1-32

EWI WĀWEEN AŌ KAJITŌK KŌN JUŌN HEARING? KomaroŃ kajitŃke juŃn hearing ilo aŃ jeje juŃn leta Ńan Department’s peba ak jabdewŃt kain peba. Ńan SNAP im medical assistance wŃt, komaroŃ barĀinwŃt kool ak ba Ńan juŃn iaan rijerbal ro bwe kokŃnaan juŃn hearing. Ilen eo Department ej bŃk kajitŃk in aŃ, Administrative Appeals Office eo enaaj mail waj Ńan eok kŃn melele ko kŃn hearing eo aŃ.

HAR 17-602.1-6; 17-602.1-31; 17-1703.1-4

JIBAŃ KO AŌ RENAĀJ JEMLOK. IMARŌN KE WŌNMAANLOK IM BŌK JIBAŃ ŃE HEARING EO AŌ EJAŃIN JINOE? Yes, Aet, joun im riiti kŃjjelĀ eo Ńan lale ŃĀĀt eo eliktata Ńan kajitŃk bwe jibaŃ ko aŃ ren wŃnmaanlok wŃt. Ńe hearing eo ejjab iwŃj Ńan eok, konaaj aikuj karool aolep kein jibaŃ kwaar bŃki me ren kar jab Ńan eok. HAR 17-602.1-10; 17-602.1-12; 17-602.1-18; 17-602.1-34; 17-1703.1-5; 17-1703.1-17

EWI AITOKIN ETALE IN? Etale in ej kijoŃ bŃk process 60 raan ko Ńan SNAP ak 90 raan ko Ńan bŃrookraam ko jet. Ńan medical im SNAP hearings, komaroŃ kajitŃk kŃn juŃn hearing me emaroŃ kamakajlok etale in Ńan case ko me rej lukkun aikuj, ĀinwŃt Ńe mour ak Ājmour eo an juŃn armej ebed ilo kauwŃtata. HAR 17-602.1-16; 17-602.1-27; 17-602.1-29; 17-1703.1-4; 17-1703.1-15 to 16.

IJ AIKUJ KE JUŌN AŌ LAWYER? KwŃjjab aikuji juŃn aŃ lawyer. KwŃj aikuji bŃk kunaam ilo hearing ak Ńe kokŃnaan ba Ńan Department, ilo jeje, bwe juŃn authorized representative enaaj bŃk jikŃm. JuŃn eo authorized representative emaroŃ juŃn mŃttaŃ, nikum, advocate, ak bar juŃn armej. Ńan bŃk naanin kŃkapilek ilo ejjelok wŃnĀĀn ak juŃn eo emaroŃ pinej-jikŃm, kŃrluk Legal Aid Society of Hawaii at 808-536-4302 (Oahu) ak 1-800-499-4302 (Neighbor Islands). HAR 17-602.1-5; 17-602.1-7; 17-602.1-25; 17-602.1-38; 17-1703.1-3

TA ŃE IJ AIKUJ JUŌN RIUKOK INTERPRETER AK JIBAŃ KO JET? IloaŃ kajitŃk juŃn hearing, komaroŃ kajitŃk bwe ren lewaj juŃn riukok interpreter, jeje ko rellap, sign language interpreter, auxiliary aid, ak jibaŃ ko jet me kwonaaj aikuji. Ńe kwŃjjab kajitŃk kŃn kein jibaŃ kein mokta jen raan in hearing eo, hearing eo enaaj kowŃnmaanlok Ńan bar juŃn raan bwe ren maroŃ kapooje eok kŃn kein jibaŃ ko kwŃj aikuji. HAR 17-602.1-5; 17-602.1-13; 17-602.1-30; 17-1703.1-6; 17-1711.1-2

TA JIMWE KO AŌ IKIJEEM HEARING? KomaroŃ kajitŃk ippĀn rijerbal eo aŃ Ńan aŃ make etale peba ko im rekoot ko mokta jen hearing eo. Ilo iien hearing komaroŃ bwe etke kwŃj lemnak bwe Department eo ear jab jimwe im kajitŃkin rikamool ro an Department’s eo. KomaroŃ barĀinwŃt bŃkmaantak rikamool ro aŃ make. Kwe im Department eo maroŃ errĀ kŃn wŃn ro remaroŃ bed ilo iien hearing eo. Lale lŃnin Ńan kĀlet juŃn riukok interpreter. HAR 17-602.1-4 to 5; 17-602.1-30; 17-602.1-36; 17-602.1-38; 17-602.1-40; 17-1703.1-3; 17-1703.1-6

TA IN FRAUD? Ńe kwŃjjab pokake kilen ripoot ko, riap, or nooj jet melele ko, emaroŃ naaj aŃ make eddo kŃrool aolepen wŃnĀĀn kein jibaŃ ko kar lewaj Ńan eok im barĀinwŃt bakkiŃ ko iumwin kien eo, ekoba kalbuuj. HAR 17-604.1; 17-1704-3, 17-1713.1-2; HRS §346-43.5, 710-1063

TA JIMWE KO JET AŌ?

- **CONFIDENTIALITY:** Department eo eban leto-letak melele ko kŃn eok elafŃe ejjelok melim ikijen ruul ko ak kien ko an federal, naaj aikuji ilo iien ko me protective service, Ńan etale ko kŃn fraud, ak Ńe kwaar make kanne juŃn peba ilo jeje bwe ren lewaj melele ko. HAR 17-601; 17-1702-5 to 6; 17-1706-6

NON-DISCRIMINATION: Department eo ejjab discriminate, exclude, ak kalijeklok nae armej ro ekkar Ńan race, color, national origin, iĀ, disability, ak sex/gender (expression or identity) ak nae kien ko an federal ak state kien ko. Ńe kwŃj tŃmak bwe Department eo ak rilelok jibaŃ ko raar likjap in lewaj jibaŃŃan eok ak discriminated nae eok, komaroŃ kalikkar abnŃnŃ eo aŃ ippĀn: Civil Rights Compliance Officer ikijeem e-mail ilo

DHSCivilRightsBox@dhs.hawaii.gov, kool (808) 586-4955 ak 711, fax Ńan (808) 586-4990 ak jejelok Ńan: Civil Rights Compliance Officer, P.O. Box 339, Honolulu, HI 96809-0339. DHS discrimination peba in abnŃnŃ ko (DHS 6000) rej bed ilo <https://humanservices.hawaii.gov> ilo jikin eo Civil Rights Corner iumwin Forms. KomaroŃ bar kwalok aŃ abnŃnŃ ippĀn U.S. Department of Health and Human Services, Office for Civil Rights, ikijeem internet

eo ilo <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, ak ikijeen ak talboon ilo: U.S. Department of Health and Human Services, Office for Civil Rights (OCR), 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, Phone: 1(800) 368-1019, TDD: 1(800) 537-7697.