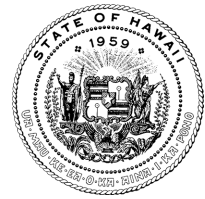


Return this form to:
State of Hawaii – Dept. of Human Services
Med-QUEST Division
P. O. Box 3490
Honolulu, HI 96811-3490



Month XX, 2024

Case Number: 00000000-XX
Nacmpuh ke telephone: (808) XXX-XXXX

FIRST LAST
STREET HWY
APT ###
CITY, HI ZIP

NUHKE: MEDICAL ASSISTANCE ELIGIBILITY RENEWAL FORM – N14

Aloha PI_FIRST PI_LAST,

Ma inge pa eligibility renewal form ke orek kais sie yac. **Nuhnuhk muhnaqs checkiyac ma nuhkewa, ac sihmuhslah ma sasuc kuh ekuhllah ma nuhkewa ke kais sie section ac topuk kihsen siyuck pucspucs kac.**

LEN ENENUH KE: Fohlohk pwepuh yohk sripac pucspucs ke len se inge <DUE DATE for Renewal Form>

Kom etuh lah kom kuh in nacklah pwepuh se inge ke online?

Orekmakihn internet ac som nuhke medical.mybenefits.hawaii.gov in oruh kuh ahksasucye ma lom mihsenge!

<<Add new N40 table with approved/ex parte members>>

Mwe kahsruh nuhke medical kuh in tui fin mwetuh tena ahksasucye ac oruh pwepuh yohk srihpac ke len enenuh ke.

Dynamic Text (if we know that income is an issue): *"It appears that your income has changed. Please update your income below and provide documentation."*

| Inen | Pwepuh Yohk Sripac |
|--------------------------------|--------------------|
| LWACTA SIMET AC LWACTA SAHFLAH | |

Kom kuh in ahksasucye pwepuh yohk sripac ke inkacnek pucspucs se inge:

- **Orekmakihn internet ac som nuhke medical.mybenefits.hawaii.gov in ahkfahlye ma lom**
- **Pahngon kuht ke telephone**
- **Neklac pwepuh, signi, ac fohlohk pwepuh se inge ke posohfuhs, email kuh fax**
- **Tuhkuh ke ofuhs se ac oruh ac ahksasucye pwepuh lom an sin mwet orekma**

Liyac **Forms Instructions Ip** ke sahflaiyen pwepuh se inge ac ma nuhkewa kom enenuh in oruh in ahksasucye ma inge.

LEN ENENUH KE: Fohlohk pwepuh se inge ac pwepuh yohk srihpac pucspucs ke <DUE DATE for Renewal Form>

Ip A Etwacack nuhke Lohm ah:

Ahok Mo **A1. Inkacnek in Sun Kom:** Inem, kuh actresi eklac (nuhke lohm ah ac/kuh pos), nacmpuh ke telephone, kuh actres nuhke email eklac?

| Etwacack ke Pacl se Inge | Eklac nuhke Ma Inge |
|--|----------------------------|
| Inen (Simet, Inmahsrton, Saflah, Seahsr): SIMET SAFLAH | |
| Actres nuhke Lohm ah: | |
| Nacmpuh ke telephone nuhke Lohm ah: | |
| Nacmpuh ke telephone nuhke Cell: | |
| Nacmpuh ke telephone nuhke Orekma: | |
| Actres nuhke Email: | |

Ahok Mo **A2. Ma Eklac Nuhke Lohm ah Ingena:** Oasr ma eklac nuh sin mwetuh suc muhtah yurim nuhke lohm ah kuh tulohkihyac Med-QUEST nuh sin kuhtwena mwetuh suc muhtah yurim nuhke lohm ah?

Mwe etwacack tohkoh fah ahkuhtweye ma kuhpahsr ke sucuc nuh sin mwetuh Ma Oruh nuh Pwacye kuh Primary ac ac kais sie mwetuh nuhke lohm ah. Fin mwe etwacack nuhke ma kahpahsr pa sutuu, eislac ac sang ma pwacye kac. Fin wacngihn mwe etwacack nuhke ma kahpahsr, nuhnuhk muhnaht sihmuhslah ma pwacye kac.

* Fin wacngihn inen mwetuh ke acn se inge sihmuhslah inen pucspucs kac

Fin wacngihn ma eklac, nuhnuhk muhnaht som nuhke ip A3

| Inen | Kuhpahsr Fuhkah Nuh Sin Mwetuh Ma Oruh nuh Pwacye kuh Primary | Eklac nuhke Ma Inge |
|-------------|--|----------------------------|
| | | |
| | | |
| | | |

Ahok Mo

Fin oasr ma eklac sin mwetuh ke lohm ah nuhnukh muhnahs orkekmakihn chart tohkoh ac sihmuhslah mwe etwacack pwacye in ahkuhtweye suc wacngihnlac ke lohm ah ac suc tiac enenuh mwe kahsrub kac.

Fin kom enenuh in sang sie mwetuh, nuhnukh muhnahs nacklah ma ke Appendix A.

| MWETUH MA WACNGIHNAC KUH TIAC ENENUH MWE KAHSRUH KE LOHM AH | | | |
|--|------------------------------------|--------------------|---|
| Inen (Simet, Inmahsrlon, Saflah, Seahsr) | Ke Srihpacn (Liyac mwe pupuhlyuck) | Len in wacngihnlac | Mwe Kahsrub Tulokihnyac |
| | | | <input type="checkbox"/> Ahok <input type="checkbox"/> Mo |
| | | | |
| <p><i>Mwe pupuhlyuck ke srihpacn mwetuh ma wacngihnlac:</i> <i>El Somlac; El Som Kacpous kuh El Kaul ke Hawaii State Hospital; El Pahyuck Fahsrelik kuh Divorced; El Misac; kuh el kaul ke Nursing Home kuh Community Care Foster Family Home; Ke Srihpac Sahyac: (nuhnukh muhnahs ahkuhtweye)</i></p> | | | |

Ahok Mo

A3. Mwe Etwacack nuhke Tax filing ke Lohm ah: Mwe etwacack nuhke tax filing tohkoh pa pwacye? Fin oasr ma sutuu nuhnukh muhnahs ahkwoyac tohkoh.

| | |
|--|---|
| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Sifacna kuh Kupahsr Nuh Sin Mwet Sahyac? |
| Oasr mwetuh kom fah claimi nuhke dependant ke tax filing? <input type="checkbox"/> AHOK <input type="checkbox"/> MO | Inen Mukul Tumom kuh Muhtwacn Kiyom (Simet, Inmahsrlon, Saflah, Seahsr) |
| Inen mwetuh pa dependent ke tax (Simet, Inmahsrlon, Saflah, Seahsr): | |
| Oasr mwet sahyac pa claimi kom nuhke dependent ke tax? | <input type="checkbox"/> AHOK <input type="checkbox"/> MO |
| Fin kom fah mwetuh suc mwet sahyac pa claimi nuhke dependent ke fili ke tax (Inen Simet, Inmahsrlon, Saflah, Seahsr): | |

Ahok Mo

A4. Mani Mwet Nuhkewa Eis ke Lohm ah: Fin mwe etwacack tohkoh eklac, nuhnuhk muhnahs sang pwepuh yohk srihpac muh ahkahlwemye ma sienna liki meetah. (Mwe pupuhlyuck pa, pay check lom an ke lusen mahlwem tolu.) Kom fin orekma sihfacna kuh self- employed, nuhnuhk muhnahs sihmuhsalah lupan mani kac.

| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Inen Orekma Lom an | Mani Kom Eis Kais Sie Mahlweem | Mwet Kol ke Orekma kuh Employer/ *Orkema Sihfacna Lom an kuh - Self-Employment | Len in Muhtwac-wacack | Len Sahflah |
|--|--------------------|--------------------------------|---|-----------------------|-------------|
| | | | | | |
| Eklac ke: | | | | | |
| | | | | | |
| Eklac ke: | | | | | |
| | | | | | |
| | | | | | |

* Nuhnuhk muhnahs eislac mani kom orekmakihn in mol nuhke orekma sihfacna lom an kuh self-employment liki mani nuhkewa kom eis nuhke mahlwem se.

Ahok Mo

A5. Kuhtwena mwetuh ke lohm ah eis mwe kahsruh sahyacn Medicaid (QUEST Integration) ke pacl inge?

| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Inen Health Insurance/Plan Fuhkah | Nempuh ke Policy | Len in Muhtwac-wacack | Len Sahflah |
|--|-----------------------------------|------------------|-----------------------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

These sections should be dynamic so we don't populate them if there are no HH Members over age 65 or disabled, etc.

Section C

This section does not apply to your household. Please continue to next section.

Section D

This section does not apply to your household. Please continue to next section.

Section E

This section does not apply to your household. Please continue to next section.

Section F

Ip B

Ahok Mo

TIAC ENENUH IN ORUH IP C, D FIN WACNGIHN MWETUH PA:



- yac 65 kuh mahtoh liki yac 65
- kom eis mwe kahsrh nuhke Social Security (SSI) Mani kac ac/kuh
- oasr tari mwe kahsrh ke disability ac/kuh
- oasr tari mwe kahsrh ke Medicare A/B kuh kewana

B1. Oasr mwet lom an muh yac 65 kuh mahtuh liki, kunlah matuh kuh fihkacalah? Oyac pac (mwetuh) muh eis mwe kahsrh nuhke Social Security (SSI) Mani, eis mwe kahsrh ke srihpacn el fihkacalah, kuh eis mwe kahsrh nuhke Medicare ke Ip A kuh Ip B. Fin actres lom an eklac, nuhnuhk muhnahs, ahksasucye actres lom an ten.

| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Mwet Kun/Handicap | Yac 65 kuh mahtoh liki | Oasr tari mwe kahsrh ke 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"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Ip C

Ahok Mo

C1. Mwe kahsrhup sin mwetuh (bank/kuh account sahyac nuhke bank, loh m ah, 401K, mani ke stocks, kuhtuh ma) eklac? Sihmuhsrah ma eklac tohkoh. * Mani ke len 1 ke mahlwem se inge

| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Mani Fuhkah/Kain in Bank | Lupan Mani Kac | Mani ke len simet ke mahlwem se inge |
|--|--------------------------|----------------|--------------------------------------|
| | | | |
| | | | |
| | | | |

Ip D

Ahok Mo

 D1. Oasr acn lom an kuh property kom moli tari kuh oasr mwetuh ke loh m ah moli tari acn kuh property?

| Inen Ma Lal uh kuh Owner (Simet, Inmahsrlon, Saflah, Seahsr) | Actres ke Acn | Lupan Mani ke Acn |
|--|---------------|-------------------|
| | | |
| | | |

D2. Kom ac/ kuh mukul tumom kuh muhtwacn kiyom oasr kuhtwena annuity?

Ahok Mo

| Inen Ma Lal uh kuh Owner (Simet, Inmahsrlon, Saflah, Seahsr) | Len in Muhtwacacack | Inen Company ke Annuity ac Actres |
|---|------------------------|-----------------------------------|
| | | |
| | | |

D3. Kom kuh mwetuh suc muhtah yurim oasr soemoul ke loan, mortgage kuh promissory note?

Ahok Mo

| Inen Ma Lal uh kuh Owner (Simet, Inmahsrlon, Saflah, Seahsr) | Len in Mol | Lupan Mani | Lupan Mani Luhluh |
|---|------------|------------|-------------------|
| | | | |
| | | | |

D4. Kom kuh mwetuh suc muhtah yurim moli acn in life estate interest sin mwet sahyac?

Ahok Mo

| Inen Ma Lal uh kuh Owner (Simet, Inmahsrlon, Saflah, Seahsr) | Len in Mol | Actres ke Acn | Lupan Mani |
|--|------------|---------------|------------|
| | | | |
| | | | |

Ahok Mo **D5.** Kom kuh mwetuh suc muhtah yurim moli kuhtuh ma in sroacng nuhke a Continuing Care Retirement Community (CCRC) kuh Life Care Community (LCC)?

| Inen Ma Lal uh kuh Owner (Simet, Inmahsrlon, Saflah, Seahsr) | Len in Muhtwacacack | Inen ac Actres ke CCRC/LCC | Lupan Mani |
|--|------------------------|----------------------------|------------|
| | | | |
| | | | |

Ip E Mwe Kahsruh in Karihngihnyac Mwet Mahtohuh

Ahok Mo

- E1.** Oasr mwetuh suc muhtah yurim enenuh kuh eis mwe kahsruh nuhke Long-Term Care ke Nursing Home, lohm in Adult Foster, ke lohm ah, lohm in Assisted Living kuh Retirement/Life Care Community?

Inen kuh Inentahl (Simet, Inmahsrlon, Saflah, Seahsr): _____

Inen kuh Inentahl (Simet, Inmahsrlon, Saflah, Seahsr): _____

Ahok Mo

- E2.** Kom ac/kuh muhtwacn kiyom kuh mukuhl tomom kukakihnulla, trade, kuh sang acn kuh mwe kahsruh-- oana mani—ke lusen mahlwem 60? Kuh, kom ac/kuh muhtwacn kiyom kuh mukuhl tomom transferi nuhke trust ke lusen mahlwem 60?

| Inem (Simet, Inmahsrlon, Saflah, Seahsr) | Kain in Mwe Kahsruh | Srihpacn | Len in Transferi | Oana Tala ekasr | Lupan Mani Moli |
|--|---------------------|----------|------------------|-----------------|-----------------|
| | | | | | |
| | | | | | |

Ip F Ma Eklac Sahyac

Ahok Mo

- F1.** Oasr ma eklac kom fah ripohrti? *Kom fin ripohrti ma eklac, nuhnuhk muhnuhs ahkahlwemye pwepuh kac.*

NUHNUHK MUHNAHS SIGNI AC FOHLOHKOH PWEPUH SE INGE ke maili, emaili, fax kuh sang sin mwet orekmah ke ohfuhs.

MWE ACSMAHKIHN: Kom kuh in pahngon kuht in oruh renewal ke telephone.

Liyac KAHS IN KAHSRUH KE PWEPUH SE INGE PAHNGPAHNG INSTRUCTIONS SECTION

Nga fahk lah ma nuhkewa nga sihmuhslah ke pwepuh in recertification pa pwacye. Fin nga sihmuhslah ma kikiyacp, nga etuh lah nga kuh in som court ac sun mwet nuhnuhkuh fal nuhke Hawaii Revised Statutes §710-1063. Ke nga signi, nga leluh bank in checki fin nga kuh in eis mwe kahsruh kac. Nga leluh pac State of Hawaii in checki fin ma nga sihmuhslah pa pwacye. Nga ridi tari ma rights luhk ac ma kunuck lasr ke sahflahiyeen pwepuh se inge ac nga kuh in sruokyacna ma inge.

| | |
|---|------------------|
| Mwet Pwacye in Contacti/Mwet ma Eis Mwe Kahsruh/Mwet Kol kuh Authorized Representative Signi: | Len (mm/dd/yyyy) |
|---|------------------|

Kuloh ke pacl lom an ac kuht luhngse in kaksre kom!

FORMS INSTRUCTIONS SECTION**SRIHPACN:**

Pwepuh se inge DHS 1100B-2 Medical Assistance Eligibility Renewal, oana sie N-14 Renewal Notice. Fin tiac kuh in orekmakihn N-14 Renewal Notice, pwepuh se inge DHS 1100B-2 kuh in orekmakihnyuck.

KAHS IN KAHSRUH:

Pwepuh se inge fah nacklah sin Mwet Pwacye in Contacti kuh Mwet Kol kuh Authorized Representative.

Mwet Pwacye in Contacti:

Fin pwepuh se inge sufwal nuhke mwe etwacack lom an, nuhnuhk muhnahs sihmuhslah ke pwepuh sahyac ac toeni pwepuh pucspucs. Nuhke Ip A-F. mahkiyac Ahok kuh Mo ac topuk kihsen sihyuck pucspucs fal nuhke ip se inge.

SIGNI NUH SIN MWET PWACYE IN CONTACTI:

Mwet Pwacye in Contacti enenuh in oruh ac signi ip se inge. Mwet suc signi el fahk lah mwe etwacack nuhkewa fah pwacye ac leluh State of Hawaii in checki ac fin ma inge fah ahkfalyelah masap se inge ke Hawaii Revised Statutes §710-1063.

Nuhnuhk muhnahs nacklah pwepuh se inge ac copy sin mwet kol kuh kuh authorized representative ke actres oasr ke sra 1 kuh som ne ohfuhs ke Eligibility Branch Office apkuhran kom (liyac ma ten). Kom kuh in pahngon Customer Service ke 1-800-316-8005, (TTY/TDD 711) in ahksahfyelah ac oruh renewal lom an ke telephone.

| | |
|------------------|--|
| Statewide | <p 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>Kauai 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</p> <p>Moloka'i State Civic Center, 65 Makaena Street, Room 110, Kaunakakai, HI 96748</p> <p>Lana'i 730 Lana'i Avenue, Lana'i City, HI 96763</p> |

| | | |
|-------------|----------------------------|---|
| OAHU | Oahu Service Center | |
| | 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 |

**IP KE APPENDIX A
ORUH MWET SASUC KE LOHM AH**

| | | | |
|--|--|--|--|
| MWET SASUC KE LOHM AH: Ke kom enenuh in SANG mwetuh alukela ke mwet se (1) mwet sasuc, nuhnuhk muhnahs copyiyac sra se inge ac sra tohkoh ac topuk kihsen sihyuck pucspucs ke kais sie mwetuh ke lohman kuh pahngon Customer Service ke 1-800-316-8005 (TTY: 711 kuh 1-800-603-1201) in eis mwe kahsrh sahyac: | | | |
| Inen Mwet Sasuc (Simet, Inmahsrln, Saflah, Seahsr) | | | |
| Fin mwet sasuc pa ahwowo se, nuhnuhk muhnahs sihmuhslah inen ninac kiyac ac inen papah tumel ten: | | | |
| Inen Ninac Kiyac (Simet, Inmahsrln, Saflah, Seahsr): | | Inen Papah Tumel (Simet, Inmahsrln, Saflah, Seahsr): | |
| Sihyuck kuh Applyi ke Mwe Kahsrh nuhke Medical? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | | | |
| Mwe Kahsrh ke Medical Services ke lusen len 90? <input type="checkbox"/> .. AHOK <input type="checkbox"/> . MO Fin Ahok, len se inge: | | | |
| Mukul kuh Muhtwacn | Len in Isuslah | **Nempuh Nuhke Social Security | |
| **Nacmpuh nuhke Social Security (SSN) enenuh ke kais sie mwetuh (nuh sin tuhlih pucspucs pac) suc siyuck kuh applyi nuhke Mwe Kahsrh ke Medical. Kuht fah contacti komtahl fin kuht enenuh mwe etwacack kac. Mwe Kahsrh fah pahtlac fin wacngihn mwe etwacack kuht enenuh in eis kac. Ke kom enenuh in eis nacmpuh nuhke SSN kuh card sasuc nuhke SSN, pahngon 1-800-772-1213 kuh som website ke socialsecurity.gov. Ke kom orekmakihn TTY pahngon 1-800-325-0778 | | | |
| Pahyuckyuck? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | Fin Ahok, Inen Mukul Tomom kuh Muhwacn Kiyom (Simet, Inmahsrln, Saflah, Seahsr): | | |
| Mani kom eis ke Mahlwem se kuh Gross monthly income (mani kom eis met liki taxes kuh deductions sahyac): | | | |
| Kom fah fili tax return nuhke federal? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO Kom ac mukul tomom kuh muhtwacn kiyom fah fili ke joint kuh oana ma se? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | | | |
| Oasr ma dependant kom fah fahk ke return lom an? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | | | |
| Inen kuh inentahl ke tax dependents (Simet, Inmahsrln, Saflah, Seahsr): | | | |
| Mwet sahyac fah claimi kom nuhke tax return lal uh? <input type="checkbox"/> AHOK <input type="checkbox"/> MO | | | |
| Fin Ahok, Inen tax filer (Simet, Inmahsrln, Saflah, Seahsr): | | *Kuhpahsr Fuhkah: | |
| Mwet sasuc pa pihtuctuc? <input type="checkbox"/> AHOK <input type="checkbox"/> . MO | Len El Fah Isuslah: | Tuhlih ekasr el fah isuslah: | |
| Kom pa Mwet U.S./kuh National? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | | | |
| Fin Mo, mwet sasuc oasr kuh el kuh in eligible immigration status? <input type="checkbox"/> . AHOK <input type="checkbox"/> . MO | | | |
| Len in Utyuk _____ | | Alien or I-94 No. _____ | |
| Immigration Fuhkah (mwe puhpuhyuck I-551, Visa, etc.): | | Status Fuhkah | |
| Inen (Simet, Inmahsrln, Saflah, Seahsr) oana sihmuhslah nuhke immigration document se. | | | |
| Nacmpuh nuhke Passport.: | | Nacmpuh ke Card Sahyac: | |
| SEVIS ID kuh Len in Tilac Orekmakihnyuck kuh expire (kom sulelah in fahk kuh tiac fahk) | | Code Fuhkah | |

| | | | | |
|--|-----------------------------|---|-----------------------|---|
| Mwet sasuc inge pa mwetuh suc mwet sahyac pa claimi nuhke dependent ke tax? <input type="checkbox"/> AHOK <input type="checkbox"/> MO Fin Ahok, nuhnuhk muhnahts sihmuhsrah inen mwetuh suc claimi mwet sasuc nuhke dependent ke tax tohkoh. | | | | |
| Mwe puhpuhlyuck nuhke kuhpahsreni ke lohm ah (oyac pac sucuc suc kuhpahsr ke step) tohtoh: | | | | |
| • Pahyuckyuck | • Pahpah kuh Ninac | • Tuhlihk | • Ma Wiyacl | • Mwetuh ma Enenuh Kahsruh kuh (Under Primary Care) |
| • Pahpah Mahtohuh kuh Ninac Mahtohuh | • Uncle/Aunt | • Ma Nahtuhl ke Niece/Ma Nahtuhl ke Nephew | • Ma Wiyacl ke Cousin | • Tuhlihk nahtuhl ke (Grandchild) |
| • Pahpah kuh Ninac ke Foster | • Tuhlihk Nahtuhl ke Foster | • Tiac Pahyuckyuck tuh tuhkweni kuh (Domestic Partnership) | | • Tiac Sucuc |
| • Sahyacn ma Kuhpahsreni (nuhnuhk muhnahts ahkuhtweyac) | | | | |
| Mwet sasuc kuhpahsreni fuhkah nuh sin Mwetuh Ma Oruh Nuh Pwacye kuh Primary ke Pwepuh se inge? (*mwe puhpuhlyuck ke mwetuh suc kuhpahsreni oasr ke sra sahyac) | | | | |
| Fin oasr mwet sahyac suc muhtah ke lohm ah, (muhtah ke lohm ah "actres se inge" ke pwepuh se inge) nuhnuhk muhnahts ahkuhtweyac tahl *kuhpahsr yurim tohkoh: | | | | |
| Mwetuh suc muhtah ke lohm ah (Simet, Inmahsrlon, Saflah, Seahsr): | | Kuhpahsr fuhkah nuh sin mwet sasuc (Simet, Inmahsrlon, Saflah, Seahsr): | | |
| 1. | | 1. | | |
| 2. | | 2. | | |
| 3. | | 3. | | |
| 4. | | 4. | | |
| 5. | | 5. | | |
| 6. | | 6. | | |
| <i>Fin Mwetuh aluhkwelah ke mwet (6) ke lohm ah nuhnuhk muhnahts copiyac sra se inge, ac nacklah ac toeni ke pwepuh se inge.</i> | | | | |

Oasr Srihpac In Tiac Sihmuhsalah ke Acn se Inge

OASR MA LOM KUH RIGHTS IN SIYUCK PACL IN LOHACNG AHKWOYAC KUH ADMINISTRATIVE HEARING

MEAC SE INGE PACL IN LOHACNG AHKWOYAC KUH ADMINISTRATIVE HEARING (“lohacng” kuh “hearing”)? Lohacng kuh hearing pa pacl Department se kuh in liyac ac reviewi case lom an ac kom enenuh in siyuck ma inge ke lusen len 90 muhtwacack ke len in ahkkahlwemye notice inge. Mwet orekma ke Department suc tiac oruh case lom an fah lohacng ahkwoyac mwe etwacack lom kac. Fin oasr ma se sutuu orwacalah, Deparkment se fah ahkwoyacalah ma se sutuu. 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

SRIHPAC PUCSPUCS IN SIYUCK PACL IN LOHACNG AHKWOYAC KUH HEARING:

- Kom tiac inese ke ma sulelah ke department nuhke pwepuh in siyuck mwe kahsrh kuh application lom an kuh kuhtwena ma ke case lom an.
- Pwepuh in siyuck mwe kahsrh kuh application lom an tiac oruh ke pacl fal: len 30 nuhke SNAP; len 90 nuhke mwe kahsrh ke medical sin mwet suc oasr mas ke disability; len 45 nuhke mwe kahsrh ke mani kuh financial assistance kuh mwe kahsrh ke medical assistance application.

HAR 17-602.1-4; 17-602.1-24; 17-647-3; 17-647-7; 17-647-14; 17-1711.1-32

NGA KUH IN SIYUCK PACL IN LOHACNG AHKWOYAC KUH HEARING FUHKAH? Kom kuh in naclah pwepuh in siyuck pacl in lohacng kuh hearing nuh sin Department se kuh sihmuhslah ma kom luhngse ke pwepuh ac fohlohkoh ke Department. Nuhke SNAP ac mwe kahsrh nuhke medical assistance, kom kuh in pahngon mwet orekma kuh fahk sin mwet orekma lah kom luhngse pacl in lohacng kuh hearing. Ke pacl Department se eis request lom an kuh ma kom siyuck, the Administrative Appeals Office fah maili kom mwe etauck kuh information nuhke pacl in lohacng kuh hearing lom an.

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

MWE KAHSRUH LUHK FAH TULOHKIHNAC. NGA KUH IN EIS MWE KAHSRUH KE LUSEN PACL NGA SANO PACL IN LOHACNG AHKWOYAC KUH HEARING? Ahok, nuhnuhk muhnahs ridi kaks in kahsrh ke deadline kuh pacl kom enenuh in siyuck mwe kahsrh lom an in tafwelah. Fin ma sulelah laltahl fah tiac oruh in kahsrh kom, kom enenuh in fohlohkoh mani kuh mwe kahsrh kom eis tari kac. 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

PUTAKA LUSEN PACL IN ORWACLAH? Ma inge kuh in oruh len 60 nuhke SNAP kuh len 90 nuhke mwe kahsrh sahyac. Kom kuh in siyuck Department se in silahklahk fin enenweyuck, oana mwetuh suc weack mas upac ac ahpkuhrahn misac nuhke medical ac SNAP. HAR 17-602.1-16; 17-602.1-27; 17-602.1-29; 17-1703.1-4; 17-1703.1-15 to 16.

NGA ENENUH MWET LAWYER? Tiac enenuh mwet lawyer. Kom fah oruh ma lom nuhke pacl in lohacng ahkwoyac kuh hearing, tuh kom kuh in fahk sin mwet orekma ke Department se ke leta lah oasr mwetuh fah srihsrngihyucki kom. Kawuck se lom an, kuh sucuc lom an, kuh mwet suc kuh in sramsram, kuh mwet sahyac kuh in srihsrngihyucki kom. Ke kom luhngse eis kaks in kahsrh sin mwet lawyer muh wacngihn molo kac pahngon the Legal Aid Society of Hawaii ke 808-536-4302 (Oahu) kuh 1-800-499-4302 (Finacn Hawaii Sahyacn acn Oahu). HAR 17-602.1-5; 17-602.1-7; 17-602.1-25; 17-602.1-38; 17-1703.1-3

MEAC FIN NGA ENENUH MWET LUHNGASLAH KUH MWE KAHSRUH SAHYAC UH? Ke pacl in lohacng ahkwoyac kuh hearing, kom kuh in siyuck mwe kahsrh ke mwet luhngaslah muh wacngihn molo, mwe rid ma oasr lwacta yohk in liyac, mwet luhngaslah ke sign language, mwetuh suc kuh in kahsrh kom kuh auxillary aid, ac mwe kahsrh sahyac. Kom fin tiac siyuck mwe kahsrh met liki pacl in lohacng ahkwoyac kuh hearing, saap tahl fah oakiyac pacl sahyac kuh reschedule hearing lom an in eis mwe kahsrh lom an. HAR 17-602.1-5; 17-602.1-13; 17-602.1-30; 17-1703.1-6; 17-1711.1-2

MEAC MA RIGHTS LUHK NUHKE PACL IN LOHACNG AHKWOYAC KUH HEARING? Kom kuh in siyuck mwet orekma in ahkkahlwemye pwepuh yohk srihpac kuh documents met liki pacl in lohacng kuh hearing orek. Ke lusen pacl in lohacng kuh hearing orek kom kuh in fahk kuhtwena ma kom nuhkuh Department se fah orwacalah sutuu ac kom kuh in siyuck kihsen siyuck pucspucs sin mwet loh luhn Department se. Kom kuh in us mwet loh lom pac. Kom ac Department enenuh in etuh ac inese nuh sin mwetuh suc fah tuhkuh ac lohacng ahkwoyac ke pacl in hearing. Liyac ma sihmuhslah nuh lucng fin kom enenuh mwet luhngaslah. 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

MEAC KAHLMEN FRAUD? Kom fin tiac ahkkahlwemye mwe etwacack kom enenuh in fahk, kuh kom kikiacp, kuh okanlah ma pwacye saap kom enenuh in fohlohkoh mani kuh mwe kahsrüh kom eis tari kac, ac kom kuh in sun prosecution ke srihpacn kom kuhnauslahh masap kac. HAR 17-604.1; 17-1704-3, 17-1713.1-2; HRS §346-43.5, 710-1063

MEAC MA RIGHTS SAHYAC UH?

- **TIAC SHARI ETWACACK LOM AN:** Department se inge fah tiac shari etauck lom an tuhsruhktuh tahl kuh in shari fin oasr masap ke federal orekmakihn ke purokrwacm, ac etwacack enenweyuck nuhke protective service, kuh fraud, kuh kom sihmuhslah lwacta in leluh mwe etwacack in shari kuh releasei. HAR 17-601; 17-1702-5 to 6; 17-1706-6
- **MET SRIHSRIH MWETUH:** Department se inge tiac srihsrih mwetuh ke srihpacn tahl mwet sahyac, kuh tuhnin kololtahl, kuh acn eltahl tuhkuh kac, kuh yac ekasr eltahl pa, kuh handicap laltahl, kuh el pa mukul kuh muhtwacn (kuh tahl luhngse oruh mukul kuh muhtwacn) kuh ke srihpac sahyac oasr ke masap ke federal kuh masap ke state. Kom fin nuhkuh muh Department se fah srihsrih kom, kom kuh in complaini ac fahk ke e-mail nuh sin: Civil Rights Compliance Officer ke DHSCivilRightsBox@dhs.hawaii.gov, kuh pahngon (808) 586-4955 kuh 711, kuh fax ke (808) 586-4990 kuh oruh lwacta nuh sin: Civil Rights Compliance Officer, P.O. Box 339, Honolulu, HI 96809-0339. DHS pwepuh in fahk Department fah srihsrih komlac (DHS 6000) ac kom kuh in eis form se ke kom som nuhke internet ke <https://humanservices.hawaii.gov> liyac ke the Civil Rights Corner ac konwacack ke Forms. Kom kuh in complaini nuh sin the U.S. Department of Health and Human Services, Office for Civil Rights, kom kuh in som ke internet ke <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, kuh maili kuh pahngon: U.S. Department of Health and Human Services, Office for Civil Rights (OCR), 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201. Nacmpuh ke telephone pa: 1(800) 368-1019, TDD: 1(800) 537-7697.