



Magaca Wakaalada  
Adeegfulinta  
Cinwaanka

# MINNESOTACARE BIILKA KHIDMADA KOOBAAD

-----  
----- Taariikhda & Wakhtiga WRKR000  
----- Magaca Codsadaha  
----- Cinwaanka

## Lambarka Kiiska

<u>Taariikhda</u> <u>Kama</u> <u>Dambeysta</u> <u>ah:</u> HADDA	<u>Biiika Hadda:</u> \$0.00	<u>Qadarka Mudo-</u> <u>dhaafka ah:</u> \$0.00	<u>Hadhaaga Deynta:</u> \$0.00	<u>Wadarta Qadarka</u> <u>Lagaa sugayo:</u> \$0.00
---	--------------------------------	--	-----------------------------------	--

Xubnaha MinnesotaCare: **Magaca Is diiwaangeliyaha**

<u>Biiika Bisha</u>	<u>Qadarka Khidmada</u>	<u>Taariikhda</u> <u>Kama</u> <u>Dambeysta ah</u> HADDA	<u>Qadarka La</u> <u>Bixiyay</u>	<u>Qadarka</u> <u>Lagaa Rabo</u>
Bisha/Sannadka	\$0.00		\$0.00	\$0.00
Bisha/Sannadka	\$0.00	Bisha/Taariikhda a/Sannadka	\$0.00	\$0.00

Caymisku wuxuu bilaabmi doonaa maalinta ugu horeysa ee bisha kadib marka khidmada laga helo dhammaan xubnaha qoyska ee looga baahan yahay inay bixiyaan khidmadda. Dadka aan looga baahnayn inay bixiyaan khidmad, caymisku wuxuu bilaabmi doonaa maalinta koobaad ee bisha kadib taariikhda ogeysiiskan.

Wac DHS Health Care Consumer Support wixii su'aalo ah ee ku saabsan khidmada MinnesotaCare.  
Taleefan: Magaalada: 651-297-3862 Gobolka ka baxsan: 800-657-3672

Biiika Khidmadda Koobaad  
Magaca Is diiwaangeliyaha

MinnesotaCare  
ST. PAUL, MN 55164-0834

Fiiri bogga xiga si aad u aragto ikhiyaarada lacag bixinta==>

Lambarka kiiska:

Lambarka Shaqaalaha: WRKR000

Lambarka Biiika: INV000001

Qadarka Lagaa Rabo: \$0.00

Taariikhda Kama Dambeysta ah ee  
Lacagbixinta: HADDA

Jeegaga ku hagaaji MinnesotaCare.

Qaddarka La Bixiyay:

\$





Si aad u hesho **macluumaadka oo qaab kale oo aad ku fahmi karto** loo dhigay ama **caawimaad** helitaan dheeraad ah oo loo siman yahay ee **adeegyada aadanaha**, waraaq u qor DHS.info@state.mn.us, wac **800-657-3739**, ama isticmaal **adeega lalinta warka ee aad doorbidayso**.

## Bilaabida Caymiskaaga

Waa inaanu helnaa lacagbixinta khidmaada ugu dambeyn duhurka maalinta shaqada ugu dambeysa ee bisha si aad u bilowdo caymiskaaga maalinta koobaad ee bisha xigta. Fiiri Shuruucda Minnesota, qaybta 256L.05, qaybhoosaadka 3.

## Sii Wadista Caymiskaaga

Isla marka caymiskaaga MinnesotaCare uu bilaabmo, waxaad heli doontaa biil bil kasta. Khidmadaada MinnesotaCare waxaa lagaa rabaa 15ka bil kasta. Haddii aanad ku bixin khidmadaada ugu dambeyn duhurka maalinta shaqada ugu dambeysa ee bisha, caymiskaagu wuxuu sii socon doonaa hal bil oo dheeri ah. Tan waa bil dhibrin ah. Waa inaad si buuxda u bixisaa lacagta mudo-dhaafka ah duhurka maalinta shaqada ugu dambeysa ee bisha dhibrinta ah si aad u sii wadato caymiskaaga. Haddii aanan helin lacagbixintaada ugu dambeyn duhurka maalinta shaqada ugu dambeysa ee bisha dhibrinta, caymiskaagu wuxuu joogsan doonaa maalinta ugu dambeysa ee bisha dhibrinta. Fiiri Shuruucda Minnesota, qaybta 256L.06, qaybhoosaadka 3, faqrada (d).

Haddii bangigu soo celiyo jeegaaga iyadoo aan lacagtaadii la bixin, ma aanad bixin khidmadaada. Waa inaad jeegaaga soo noqday ku beddeshaa jeega lacaghayaha, amar lacagbixineed ama lacag caddaan ah. Lacagbixinta lacag caddaan ah waxaa lagu sameyn karaa oo keliya shaqsi ahaan. Ha ku dirin lacag caddaan ah boostada. Fiiri Shuruucda Minnesota, qaybta 256L.06, qaybhoosaadka 3, faqrada (b).

Xubnaha aan loo baahnayn inay bixiyaan khidmadda

Qaar ka mid ah xubnaha MinnesotaCare laguma soo dallacayo khidmad. Waxaa ka mid ah kuwa soo socda:

- Dadka dakhliga qoyskoodu ka hooseeyo 35 boqolkiiba xadka saboolnimada federaalka
- Xubnaha militariga ee u qalma MinnesotaCare 24 bilood gudahood ka dib markay dhammeeyaan waajibaadka ciidaanka, iyo qoysaskooda. Xubnahan MinnesotaCare ma bixiyaan khidmado muddo 12 bilood ah
- Hindida Mareykanka iyo Dhaladka Alaska iyo qoysaskooda
- Carruurta ka yar da'da 21

Sida loo bixiyo khidmadda MinnesotaCare

Waxaad lacagta ku bixin kartaa onlaynka, taleefanka, boostada ama shaqsi ahaan.

1. Onlaynka: <http://payments.dhs.state.mn.us>. Qaababka lacagbixinta ee la aqbalo waa kaarka deynta (VISA iyo MasterCard), kaarka bangiga ama jeeg elegranoog ah.
2. Taleefan ahaan: Wac 800-657-3672 oo ikhiyaarka saxda ah ka dooro miinyuuga taleefanka. Qaababka lacagbixinta ee la aqbalo waa kaarka deynta (VISA, MasterCard ama Discover), kaarka bangiga ama jeeg elegranoog ah.
3. Boosto ahaan: Boostada ku dir jeeg ama amarka lacagbixinta, iyo rasiidhka lacag bixinta oo xiran, iyadoo la adeegsanayo baqshadda la isku magacaabayoo oo ay ku jirto biilkaaga. Lambarka kiiskaaga ku qor jeegaaga ama amarkaaga lacagta.
4. Shaksi ahaan: Biilkaaga ugu keen Minnesota Department of Human Services cinwaanka halkan ku qoran. Haddii aad rabto inaad ku bixiso lacag caddaan ah, waa inaad haysataa qadarka saxda ah. Lacaghayuhu ma hayo wax baaqi ah.

Waxaad shaqsi ahaan ku bixin kartaa Isniinta ilaa Jimcaha, 8:00 subaxnimo.-5:00 galabnimo.

Department of Human Services  
MinnesotaCare  
540 Cedar Street  
St. Paul, MN 55101

Markaad bixiso jeeg aad lacagta ku bixinayso, waxaad noo oggolaaneysaa inaan sameyno mid ka mid ah kuwan soo socda: 1) isticmaalka macluumaadka jeegaaga si aan koontadaada uga sameyno wareejinta lacagaha elektarooningga ah ee hal mar ama 2) lacagbixinta u diyaarino macaamil jeeg ahaan. Marka aan u isticmaalno macluumaadka jeegaaga si aan u sameyno wareejinta lacagaha elektarooningga ah, lacagaha waxaa laga yaabaa in laga laabto isla maalinta aan helno lacagtaada, oo jeegaaga lacagcelinta dib ugama heli doontid hay'adaada maaliyadeed. Haddii aad wax su'aalo ah ama walaac ah qabtid, fadlan la xiriir MinnesotaCare lambarka 651-297-3862 haddii aad joogto aagga Twin Cities ama taleefanka wicitaanka bilaashka ah ee 800-657-3672 marka aad ka baxsan tahay aagga Twin Cities. Ama isticmaal adeegga lalinta warka ee aad doorbidayso.

Wixii macluumaad dheeraad ah, ka booqo boggayaga  
internetka halkan <https://mn.gov/dhs/minnesotacare>

## Xuquuqaha Rafcaanka

Rafcaan waa marka aad qoraal ahaan uga dalbato garsooraha adeegyada aadanaha inuu dib u eego go'aanka laga gaaray kiiskaaga MinnesotaCare. Waxaad rafcaan qaadan kartaa haddii aanad ku raacsanayn tallaabo aanu qaadno. Waxaad rafcaan ka qaadan kartaa ficol ku saabsan caymiskaaga ama khidmadaada. Waa inaad rafcaan ka qaadataa 30 maalmood gudahood laga bilaabo taariikhda aad hesho biilka khidmada ama ogeysiiska joojinta caymiska. Waxaad codsan kartaa rafcaan adigoo sameynaya mid ka mid ah kuwan:

- Ka galaya koontadaada halkan [www.mnsure.org](http://www.mnsure.org)
- Ka wacaya MNsure Contact Center halkan 855-366-7873
- Codsigaaga rafcaanka ugu diraya MNsure, 81 Seventh Street East, Suite 300, St. Paul, MN 55101-2211 ama DHS Appeals Division, sanduuqa Boostada 64941, St. Paul, MN 55164-0941
- dhammeystiraya oo gudbinaya foomka internetka ee laga heli karo  
halkan <https://edocs.dhs.state.mn.us/lfservr/Public/DHS-0033-ENG-eform>
- Shakhxi ahaan u booqanaya Waaxda Adeegyada Aadanaha ee Minnesota, Desk Information, 444 Lafayette Road North, St. Paul, MN 55155

Waxaad rafcaan ka qaadan kartaa ilaa 90 maalmood laga bilaabo taariikhda biilka khidmada ama ogeysiiska joojinta caymiska haddii aad muujiso sabab wanaagsan oo aad rafcaanka ugu qaadan wayday sida ugu dhakhsaha badan.

## Sii wadista Dheefahaaga

Si aad dheefahaaga u sii hesho inta lagu jiro rafcaanka, waa inaad gudbisaa rafcaanka adigoo bixinaya dhammaan khidmadaha mudo dhaafka ah labadaba ugu dambeyn taariikhda kama dambeysta ah ee ogeysiiska joojinta caymiska. Ugu sheeg DHS qoraal ahaan haddii aanad rabin in dheefahaagu ay sii socdaan.

Muhiim: Haddii aad ku guuldaraysato rafcaankaaga, waxaa laga yaabaa inaad dib u bixiso dheefaha aad heshay intii aad sugaysay rafcaankaaga.

Waa inaad sii wadaa lacag bixinta khidmadaha ilaa rafcaanka la go'aaminayo. Eeg Shuruucda Minnesota, qaybta 256L.06, qaybhoosaadka 3.

Waxaa laga yaabaa inaad hesho talo sharci oo lacag la'an ah ama rafcaanka caawimaad uga hesho xafiiska gargaarka sharciga ee degmadaada. Si aad ula xiriirto xafiiskaaga gargaarka sharciga ee maxalliga ah, wac mid ka mid ah lambaradan:

- Degmada Hennepin: 612-334-5970
- Degmada Ramsey: 651-222-4731
- Dhammaan degmooyinka kale: 888-354-5522 (bilaa-khidmad)



## Ogeysiiska Xuquuqaha Madaniga

CB3 HC-Medical 1-18

Takooridu waxay liddi ku tahay sharciga. The Minnesota Department of Human Services (DHS) ma sameyso takoor ku salaysan waxyabaha soo socda:

* isirka	* caqidada	* xaalada kaalmada dawlada	* naafanimada
* midabka	* diinta	* xaalada guurka	* galmada (oo ay ku jirto faquuqa galma iyo aqoonsiga jinsiga)
* asalka qaran	* jihadha galmada	* da'da	
-----	* caqiido siyaasadeed		

### Adeegyada Gargaarka Caqabadaha

DHS waxay bixiyaan adeegyada kaalmayneed sida turjumaano xirfad leh ama macluumaad lagu heli karo qaabab la heli karo, lacag la'aan iyo waqt haboon si loo hubiyo fursad isku mid ah oo looga qaybqaato barnaamijayadaya daryeelka caafimaadka. Kala xiriir miiska xubinta ee Minnesota Health Care Program (MHCP) halkan dhs.info@state.mn.us ama 800-657-3739, ama isticmaal adeegga lalinta warka ee aad doorbideyso.

### Adeegga Kaalmada Luuqadeed:

DHS waxay bixisa dukumiintiyo la turjumay iyo luuqada hadalka oo fasiran, bilaash ah oo lagu bixinayo waqt ku haboon, marka adeegyada kaalmada luuqadeed loo baahan yahay si loo hubiyo in dadka ku hadla Ingiriisiga xaddidan ay macluumaadkeena iyo adeegyadeena u helaan si wanaagsan. Kala xiriir miiska xubinta ee Minnesota Health Care Program (MHCP) halkan dhs.info@state.mn.us ama 800-657-3739, ama isticmaal adeegga lalinta warka ee aad doorbideyso.

## Cabashooyinka Xuquuqaha Madaniga ah

Waxaad xaq u leedahay inaad soo gudbiso cabasho takoor ah haddii aad aaminsan tahay in si takoor ah ay kuula dhaqantay wakaalad adeeg aadane. Wuxaa si toos ah ula xiriir kartaa mid ka mid ah saddexda wakaaladood ee soo socda si aad u gudbiso cabasho takoor ah.

### U.S. Department of Health and Human Services' Office for Civil Rights (OCR)

Waxaad xaq u leedahay inaad cabasho u gudbiso OCR, oo ah wakaalad federaal, haddii aad aaminsan tahay in lagugu takooray mid ka mid ah kuwan soo socda:

* isirka	* da'da
* midabka	* naafanimada
* asalka qaran	* jinsiga

Si toos ah ula xiriir OCR si aad cabasho ugu gudbiso:

Director, U.S. Department of Health and Human Services' Office for Civil Rights  
200 Independence Avenue SW, Room 509F  
HHH Building  
Washington, DC 20201  
800-368-1019 (codka) 800-537-7697 (TDD)  
Barta Cabashada:  
<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

### Minnesota Department of Human Rights (MDHR)

Gudaha Minnesota, waxaad xaq u leedahay inaad cabasho u gudbiso MDHR haddii aad aaminsan tahay in lagugu takooray sababo ku salaysan mid ka mid ah kuwan soo socdaa:

* isirka	* diinta	* jihadha galmada
* midabka	* caqidada	* xaalada guurka
* asalka qaran	* jinsiga	* xaalada kaalmada dawlada
* naafanimada		

Si toos ah ula xiriir MDHR si aad ugu gudbiso cabasho:

## DHS

Waxaad xaq u leedahay inaad cabasho u gudbiso DHS  
haddii aad aaminsan tahay in lagugu takooray  
barnaamijyadayaada daryeelka caafimaadka sababo la xiriira  
mid ka mid ah kuwan soo socda:

* isirka	* jihad galma	* jinsiga (oo ay ku jirto galma qaybaha iyo aqoonsiga jinsiga)
* midabka	* naafanimada	* caqiido
* asalka qaran	* xaalada guurka	siyaasadeed
* caqiidada	* da'da	
* diinta	* xaalada kaalmada dawlada	

Cabashooyinka waa inay qoran yihiin oo lagu gudbiyaa 180 maal mood gudahood laga bilaabo taariikhda aad ogaatay takoorka la sheegay. Cabashadu waa inay la socdaan magacaaga iyo cinwaankaaga oo ay sharaxdaa takoorka aad ka cabanayso. Ka dib markaan helno cabashadaada, dib ayaanu u eegi doonaa oo waxaanu kugu soo wargelin doonnaa qoraal ku saabsan haddii aanu awood u leenahay inaanu baarno. Haddii aanu awoodaas leenahay, waxaanu baaraynaa cabashada.

DHS waxay natijjada baaritaanka kugu ogeysiin doontaa qoraal ahaan. Waxaad xaq u leedahay inaad rafcaan ka qaadato natijjada haddii aanad ku raacsanayn go'aanka. Si aad rafcaan uga qaadato, waa inaad dirtaa codsi qoraal ah si aad u hesho dib u eegista natijjada baaritaanka DHS. Ka dhig mid kooban oo sheeg sababta aad u diidit tahay go'aanka. Ku dar macluumaad dheeraad ah oo aad u maleynayso inay muhiim tahay.

Haddii aad cabasho u gudbiso sidan oo kale, dadka u shaqeeya wakaalada lagu magacaabay cabashada kaama aangoosan karaan.

Tani waxay la macna tahay inaanay kugu ciqaabi karin sinnaba inaad u gudbiso cabasho. Soo gudbinta cabasho sidan oo kale ah kaama hor istaagayso inaad raadsato xalal kale oo sharci ama maamul ah.

Si toos ah ula xiriir DHS si aad u gudbiso cabasho takoor ah:

Civil Rights Coordinator  
Minnesota Department of Human Services  
Equal Opportunity and Access Division  
P.O. Box 64997  
St. Paul, MN 55164-0997  
651-431-3040 (fariin cod ah) ama isticmaal adeegga lalinta  
warka ee aad doorbidayso