

Mehn pohnlangih sawas kann

MWAROMWI (AHD)		NEMPEHN ID	
<p>Home and Community Based Service program pahn sawas ki soahngen sawas kan me pahn kak sewese emen emen meh koneng en ale sawas sang sahpis en Medicaid nan community kan likin institutional service.</p> <p>Program kan me sansal pahn Home and Community Based Services iei:</p> <ul style="list-style-type: none"> • Community First Choice (CFC) • COPES Waiver • Residential Support Waiver (RSW) • New Freedom Waiver • Medicaid Alternative Care (MAC) <p>I pilada de koasoanehdi ien alehda sawas oh sahpis sang Home and Community Based program, kaidehn sawas en neris sang imwei.</p>			
SAIN		DATE	
SAIN (WELIEPE)	<input type="checkbox"/> Silepe <input type="checkbox"/> Weliepe	DATE	
SOCIAL WORKER WASAN SAIN/ CASE MANAGER WASAN SAIN		DATE	
AGENCY		NEMPEHN DELEPWOHN (IANGAHKI AREA CODE)	
<p>Pah iei omw pwung ihn rapahki Administrative Hearing:</p> <p>Ma komw sohte alahl da ong Home and Community Based services komw ahnki pwungin repen Aministrative Hearing, Komw ahnki rahn 90 sang ni rahn me ke sohte alahl dahu ken repen pwungih. Ma komw pahn repen pwung komw kak nting lahng Community Service Division de Area Agency on Aging office me mih amw wasahn kouson. Komw pil kak nting lahng:</p> <p>OFFICE OF ADMINISTRATIVE HEARINGS, MAIL STOP: 42489, DEPARTMENT OF SOCIAL AND HEALTH SERVICES, PO BOX 42489, OLYMPIA WA 98504-2489.</p>			