

HealthPartners® Minnesota Senior Health Options (MSHO) (HMO SNP) offered by HealthPartners, Inc.

D-SNP Annual Notice of Changes for 2024

Introduction

You are currently enrolled as a member of our plan. Next year, there will be some changes to our benefits, coverage, and rules. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. To get more information about costs, benefits, or rules please review the *Member Handbook*, which is located on our website at healthpartners.com/msho. Key terms and their definitions appear in alphabetical order in the last chapter of your *Member Handbook*.

Additional resources

- You can get this *Annual Notice of Changes* for free in other formats, such as large print, braille, or audio. Call HealthPartners MSHO Member Services at the number at the bottom of this page. The call is free.
- To make or change a standing request to get this document, now and in the future, in a language other than English or in an alternate format, call Member Services at the number at the bottom of this page.
- We have free interpreter services to answer any questions that you may have about our health or drug plan. To get an interpreter just call us at 952-967-7029 or 888-820-4285. Someone that speaks your language can help you. This is a free service.

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If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week, April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

A. Disclaimers

- ❖ HealthPartners is a health plan that contracts with both Medicare and the Minnesota Medical Assistance (Medicaid) program to provide benefits of both programs to enrollees. Enrollment in HealthPartners depends on contract renewal.
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B. Reviewing your Medicare and Medical Assistance coverage for next year

It is important to review your coverage now to make sure it will still meet your needs next year. If it doesn't meet your needs, you may be able to leave our plan. Refer to **Section D** for more information on changes to your benefits for next year.

If you choose to leave our plan, your membership will end on the last day of the month in which your request was made. You will still be in the Medicare and Medical Assistance programs as long as you are eligible.

If you leave our plan, you can get information about your:

- Medicare options in the table in **Section E2**, how to choose a plan,
- Medical Assistance options in **Section E2**.
- If you choose to leave our plan, you will be automatically enrolled in our plan's Minnesota Senior Care Plus (MSC+) plan for your Medical Assistance services if our MSC+ plan is offered in your county.
 - You can ask in writing to be enrolled in the MSC+ plan you were enrolled in before our plan's Minnesota Senior Health Options (MSHO) enrollment.
 - If our plan does not have an MSC+ plan in your county, you will be enrolled in the MSC+ plan that is available in your county.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week, April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

B1. Information about HealthPartners MSHO

- HealthPartners is a health plan that contracts with both Medicare and Medical Assistance to provide benefits of both programs to members.
- Coverage under HealthPartners MSHO is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- When this *Annual Notice of Changes* says “we,” “us,” “our,” or “our plan,” it means HealthPartners.

B2. Important things to do

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - Review benefit changes to make sure they will work for you next year.
 - Refer to **Section D1** for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Can you use the same pharmacies?
 - Review changes to make sure our drug coverage will work for you next year.
 - Refer to **Section D2** for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Refer to **Section C** for information about our *Provider and Pharmacy Directory*.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week, April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

- **Think about your overall costs in the plan.**
 - How do the total costs compare to other coverage options?
- **Think about whether you are happy with our plan.**

If you decide to stay with HealthPartners MSHO:

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you automatically stay enrolled in HealthPartners MSHO.

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to **Section E2** for more information). If you enroll in a new plan, you will get a notice of when your new coverage will begin. Look in section E2 to learn more about your choices.

C. Changes to our network providers and pharmacies

Our provider and pharmacy networks have changed for 2024.

Please review the 2024 *Provider and Pharmacy Directory* to find out if your providers or pharmacy are in our network. An updated *Provider and Pharmacy Directory* is located on our website at healthpartners.com/msho. You may also call Member Services at the numbers at the bottom of the page for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It's important that you know that we may also make changes to our network during the year. If your provider leaves our plan, you have certain rights and protections. For more information, refer to **Chapter 3** of your *Member Handbook*.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week, April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We're changing our coverage for certain medical services next year. The table below describes these changes.

Benefit	2023 (this year)	2024 (next year)
<p>Vision – Progressive Lenses</p>	<p>Progressive lenses are not covered.</p>	<p>You pay \$0.00 for coverage of progressive lenses for eyeglasses. Limited to 1 pair of lenses per member per year.</p>
<p>Services Requiring Prior Authorization</p> <p>Outpatient diagnostic tests and therapeutic services and supplies</p> <ul style="list-style-type: none"> • Radiation (radium and isotope) therapy including technician materials and supplies • Other outpatient diagnostic tests – Diagnostic Radiology, including MRI and CT 	<p>Services do not require prior authorization.</p>	<p>Services may require prior authorization.</p>



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

D2. Changes to prescription drug coverage

Changes to our Drug List

An updated *List of Covered Drugs* is located on our website at healthpartners.com/msho. You may also call Member Services at the numbers at the bottom of the page for updated drug information or to ask us to mail you a *List of Covered Drugs*.

The *List of Covered Drugs* is also called the “Drug List.”

We made changes to our Drug List, which could include removing or adding drugs, changing the restrictions that apply to our coverage for certain drug.

Review the Drug List to **make sure your drugs will be covered next year** and to find out if there will be any restrictions.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at the numbers at the bottom of the page to ask for a list of covered drugs that treat the same condition.
 - This list can help your provider find a covered drug that might work for you.
- Ask us to cover a temporary supply of the drug.
 - In some situations, we cover a **temporary** supply of the drug during the first 90 days of the calendar year.
 - This temporary supply is for up to 30 days. (To learn more about when you can get a temporary supply and how to ask for one, refer to **Chapter 5** of your *Member Handbook*.)
 - When you get a temporary supply of a drug, talk with your doctor about what to do when your temporary supply runs out. You can either switch to a different drug our plan covers or ask us to make an exception for you and cover your current drug.

Changes to prescription drug costs

There are no changes to the amount you pay for prescription drugs in 2024. Read below for more information about your prescription drug coverage.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

The following table shows your costs for drugs in each of our cost-sharing drug tiers.

	2023 (this year)	2024 (next year)
<p>Drugs in Tier 1 - Generic <i>(generic drugs)</i></p> <p>Cost for a one-month supply of a drug in Tier 1 - Generic that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>
<p>Drugs in Tier 1 - Brand <i>(brand name drugs)</i></p> <p>Cost for a one-month supply of a drug in Tier 1 - Brand that is filled at a network pharmacy</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>	<p>Your copay for a one-month (30-day) supply is \$0 per prescription.</p>

E. Choosing a plan

E1. Staying in our plan

We hope to keep you as a plan member. You do not have to do anything to stay in our plan. If you do **not** change to another Medicare plan or change to Original Medicare, you automatically stay enrolled as a member of our plan for 2024.

E2. Changing plans

Most people with Medicare can end their membership during certain times of the year. Because you have Medical Assistance you may be able to end your membership in our plan or switch to a different plan one time during each of the following **Special Enrollment Periods**:

- January to March
- April to June
- July to September



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week, April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

In addition to these three Special Enrollment periods, you may end your membership in our plan during the following periods:

- The **Annual Enrollment Period**, which lasts from October 15 to December 7. If you choose a new plan during this period, your membership in our plan ends on December 31 and your membership in the new plan starts on January 1.
- The **Medicare Advantage (MA) Open Enrollment Period**, which lasts from January 1 to March 31. If you choose a new plan during this period, your membership in the new plan starts the first day of the next month.

There may be other situations when you are eligible to make a change to your enrollment. For example, when:

- you moved out of our service area,
- your eligibility for Medical Assistance or Extra Help changed, **or**
- if you recently moved into, currently are getting care in, or just moved out of a nursing facility or a long-term care hospital.

Your Medicare services.

You have three options for getting your Medicare services. By choosing one of these options, you automatically end your membership in our plan.

1. You can change to:

Another Medicare health plan

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

- Call the State Health Insurance Assistance Program (SHIP) at 1-800-333-2433 (TTY users call 711 or use your preferred relay service). For more information or to find a local Senior LinkAge Line® office in your area, please visit <https://mn.gov/senior-linkage-line/>

OR



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

Enroll in a new Medicare plan.

You will automatically be disenrolled from our plan when your new plan's coverage begins.

If you choose to leave our plan, you will be automatically enrolled in our plan's Minnesota Senior Care Plus (MSC+) plan for your Medical Assistance services if our MSC+ plan is offered in your county. You can ask in writing to be enrolled in the MSC+ plan you were enrolled in before our plan's MSHO enrollment. If our plan does not have an MSC+ plan in your county, you will be enrolled in the MSC+ plan that is available in your county. Contact your county financial worker if you have questions. If you currently have a medical spenddown and you choose to leave our plan, your Medical Assistance will be provided fee-for-service. You will not be enrolled in another health plan for Medical Assistance services.

2. You can change to:

Original Medicare with a separate Medicare prescription drug plan and stay with the current Medical Assistance services.

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

- Call the State Health Insurance Assistance Program (SHIP) at 1-800-333-2433 (TTY users call 711 or use your preferred relay service). For more information or to find a local Senior LinkAge Line® office in your area, please visit <https://mn.gov/senior-linkage-line/>

OR

Enroll in a new Medicare prescription drug plan.

You will automatically be disenrolled from our plan when your Original Medicare coverage begins.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

If you choose to leave our plan, you will be automatically enrolled in our plan's Minnesota Senior Care Plus (MSC+) plan for your Medical Assistance services if our MSC+ plan is offered in your county. You can ask in writing to be enrolled in the MSC+ plan you were enrolled in before our plan's MSHO enrollment. If our plan does not have an MSC+ plan in your county, you will be enrolled in the MSC+ plan that is available in your county. Contact your county financial worker if you have questions. If you currently have a medical spenddown and you choose to leave our plan, your Medical Assistance will be provided fee-for-service. You will not be enrolled in another health plan for Medical Assistance services.

3. You can change to:

Original Medicare without a separate Medicare prescription drug plan and stay with the current Medical Assistance services.

NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.

You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the State Health Insurance Assistance Program (SHIP) at 1-800-333-2433 (TTY users call 711 or use your preferred relay service). For more information or to find a local Senior LinkAge Line® office in your area, please <https://mn.gov/senior-linkage-line/>

Here is what to do:

Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

If you need help or more information:

- Call the State Health Insurance Assistance Program (SHIP) at 1-800-333-2433 (TTY users call 711 or use your preferred relay service). For more information or to find a local Senior LinkAge Line® office in your area, please visit <https://mn.gov/senior-linkage-line/>

You will automatically be disenrolled from our plan when your Original Medicare coverage begins.



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

If you choose to leave our plan, you will be automatically enrolled in our plan's Minnesota Senior Care Plus (MSC+) plan for your Medical Assistance services if our MSC+ plan is offered in your county. You can ask in writing to be enrolled in the MSC+ plan you were enrolled in before our plan's MSHO enrollment. If our plan does not have an MSC+ plan in your county, you will be enrolled in the MSC+ plan that is available in your county. Contact your county financial worker if you have questions. If you currently have a medical spenddown and you choose to leave our plan, your Medical Assistance will be provided fee-for-service. You will not be enrolled in another health plan for Medical Assistance services.

F. Getting help

F1. Our plan

We're here to help if you have any questions. Call Member Services at the numbers at the bottom of the page during the days and hours of operation listed. These calls are toll-free.

Read your *Member Handbook*

Your *Member Handbook* is a legal, detailed description of our plan's benefits. It has details about benefits for 2024. It explains your rights and the rules to follow to get services and prescription drugs we cover.

The *Member Handbook* for 2024 will be available by October 15. An up-to-date copy of the *Member Handbook* is available on our website at healthpartners.com/msho. You may also call Member Services at the numbers at the bottom of the page to ask us to mail you a *Member Handbook* for 2024.

Our website

You can visit our website at healthpartners.com/msho. As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our Drug List (*List of Covered Drugs*).



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

F2. State Health Insurance Assistance Program (SHIP): Senior LinkAge Line®

You can also call the SHIP. In Minnesota, the SHIP is called the Senior Linkage Line®. Senior Linkage Line can help you understand your plan choices and answer questions about switching plans. Senior LinkAge Line® is not connected with us or with any insurance company or health plan. Senior LinkAge Line® has trained counselors and services are free. Senior LinkAge Line® phone number is 1-800-333-2433 (TTY users call 711 or use your preferred relay service) For more information or to find a local Senior LinkAge Line® office in your area, please visit <https://mn.gov/senior-linkage-line/>

F3. Ombudsperson for Public Managed Health Care Programs

The Ombudsperson for Public Managed Health Care Programs can help you if you have a problem with our plan. The ombudsperson's services are free and available in all languages. The Ombudsperson for Public Managed Health Care Programs:

- works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- is not connected with us or with any insurance company or health plan. The phone number for the Ombudsperson Program is 1-651-431-2660 (Twin Cities metro area); 1-800-657-3729 (outside the Twin Cities metro area). TTY users call 711 or use your preferred relay service.

F4. Medicare

To get information directly from Medicare, call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from our plan and enroll in another Medicare plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare plans.

You can find information about Medicare plans available in your area by using Medicare Plan Finder on Medicare's website. (For information about plans, refer to www.medicare.gov and click on "Find plans.")



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho

Medicare & You 2024

You can read the *Medicare & You 2024* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. This handbook is also available in Spanish, Chinese, and Vietnamese.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

F5. Medical Assistance

Minnesota's office of Medical Assistance is the Department of Human Services. Call 1-800-657-3739 (outside Twin Cities metro area) or 1-651-431-2670 (Twin Cities metro area). TTY users should call 1-800-627-3429 or 711 or use your preferred relay service



If you have questions, please call HealthPartners MSHO Member Services at 952-967-7029 or 888-820-4285. TTY users should call 711. Hours are: **Oct. 1 through March 31**, 8 a.m. to 8 p.m. CT, **seven days a week**, **April 1 to Sept. 30**, 8 a.m. to 8 p.m. CT **Monday - Friday**. The call is free. **For more information**, visit healthpartners.com/msho



Civil Rights Notice

Discrimination is against the law. HealthPartners does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by HealthPartners. You may file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Civil Rights Coordinator
Office of Integrity and Compliance, MS 21103K
HealthPartners
P.O. Box 1309
Minneapolis, MN 55440-1309
1-844-363-8732 (toll free), 711 (TTY), 952-883-5522 (fax)
integrityandcompliance@healthpartners.com (email)

Auxiliary Aids and Services

HealthPartners provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** 1-866-885-8880.

Language Assistance Services

HealthPartners provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** 1-866-885-8880.

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by HealthPartners. You may also contact any of the following agencies directly to file a discrimination complaint:

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

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

Office for Civil Rights, U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Customer Response Center: 800-368-1019 (toll free)
800-537-7697 (TTY)
ocrmail@hhs.gov (email)

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North
Suite 201
St. Paul, MN 55104
651-539-1100 (voice)
800-657-3704 (toll free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- religion (in some cases)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

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 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.

1-866-885-8880 (TTY:711)

Attention. If you need free help interpreting this document, call the above number.

ያስተውሉ፡ ካለምንም ክፍያ ይህንን ዶኩመንት የሚተረጎም ለአስተርጓሚ ከፈለጉ ከላይ ወደተጻፈው የስልክ ቁጥር ይደውሉ።

ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

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ဟ်သူဉ်ဟ်သးဘဉ်တက့ၢ်. ဝဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလီၤလၢတၢ်ကကျိးထံဝဲဒဉ်လံာ် တီလံာ်မိတခါအံၤန့ၢ်,ကိးဘဉ် လီၤဝဲစိနီၢ်ဂံၢ်လၢထးအံၤန့ၢ်တက့ၢ်.

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