Dartmouth Health

NH Health Access Network
financial help – for your health

Codsadaha qaaliga ahoow:

Haddii lacag bixinta kharashyada daryeelka caafimaadka ay kugu abuuri karaan dhibaato dhaqaale, fadlan buuxi codsigan.

Codsigan ayaa naga caawin doona go'aaminta awooddeena aan ku dhimi karno kharashaadka adeegyada lagu bixiyo goob kasta oo Dartmouth Health ah. Fadlan ka jawaab dhammaan su'aalaha adiga ama qoyskaaga khuseeya. Macluumaad kasta oo aad bixiso waa qarsoodi waxaana dib u eegis ku sameeya oo kaliya shaqaalaha ka shaqaynaya codsigaaga.

Haddii aad leedahay caymis waxaa laga yaabaa inaad sidoo kale xaq u yeelato kaalmo dhaqaale oo leh bixiyayaasha kale ee ka qayb qaadanaya NH Health Access Network. NH Health Access Network waa shabakad cisbitaal oo iyo bixiyeyaasha kale ee daryeelka caafimaadka ka shaqeeya si ay u horumariyaan helitaanka daryeelka caafimaadka carruurta caymis koodu hooseeyo iyo dadka waaweyn ee deggan Gobolka New Hampshire.

Ka hor intaaan la bixin wax kaalmo dhaqaale ah, waa in aad horey u soo dhammaysay dhammaan agabyda kale ee lacag bixinta oo ay ku jiraan caymiska, kaalmada ay bixiso dawlada, dacwadda, ama masuuliyadda qolo saddexaad. Fadlan isticmaal liiska hubinta ee hoose si aad u hubiso inaad ku dartay dhammaan macluumaadka.

		Loo baahan yahay	N/A (Ma khuseyso)
1.	Nuqul dhammaystiran oo ah Soo celinta Canshuurta Dakhliga Federaalka ee ugu dambeysay iyo dhammaan jadwallada	◯	◯
2.	Nuqullada dhammaan foomyada W-2 ee ugu dambeeyay	◯	◯
3.	Nuqullada saddexda (3) jeegaga ee mushaharka ugu dambeeyay ama bayaan ka soo baxay loo shaqeeyaha	◯	◯
4.	Nuqullada saddexda (3) bayaan ee bangiga ugu dambeeyay (tusaale, akoonka kaydinta, akoonka hubinta, akoonka Lacagta Dhakhliga suuqa, IRA, 401K, iwm.)	◯	◯
5.	Nuqullada shaqo la'aanta, bayaanada dheefaha magdhawga naafada	◯	◯
6.	Nuqullada dheefaha sooshiyaal sekiyuuritiga iyo/ama hawlgabka	◯	◯
7.	Nuqulka Qoondaynta Foojarada Cuntada	◯	◯
8.	Nuqullada ilaha saami qaybsiga, sanduuqyada hantida qofka dhintay iyo bayaannada cashuurta	◯	◯
9.	Nuqullada ogeysiisyada kaalmada dawladda;		
	- Ogeysiisyada Waaxda Caafimaadka iyo Adeegyada Aadanaha (boggaga oo dhan)	◯	◯
	- Waraaqaha Daawada Lagu gatay ee Medicaid, Nuqullada Ogeysiisyada Diidmada ee Medicaid	◯	◯
	- Ogeysiisyada laga helo Qorshaha Kaalmada Lacagta Caymiska iyo Caymiska Goobta Suuqa	◯	◯

Waxaad sii ahaan doontaa inaad mas'uul ka ahaato maaliyada wixii adeegyo ah ee aad hesho ilaa codsigaaga oo dhammaystiran la helo. Haddii aanan kula soo xiriirin 30 maalmood gudahood kadib markaad soo celiso codsigaaga, ama aad u baahan tahay in laga caawiyo buuxinta codsiga, fadlan ka wac mid ka mid ah U doodaha Bukaanadeena (844) 647-6436. **Saacadaha shaqada waa 9 am – 4:30 pm, Isniin - Jimco.**

Codsiyada la dhammaystiray waa in lagu soo celiyaa mid ka mid ah ciwaannada hoos ku qoran:

Dartmouth Hitchcock Xarunta Caafimaadka
One Medical Center Drive
PFS: Level 3 FAA
Lebanon, NH 03756
Fakis: (603) 650-6142

New London Hospital
PO Box 2150
Attn: La taliyaha dhaqaalaha
New London, NH 03257
Fakis: (603) 526-5085

Cheshire Medical Center
580 Court Steet
PFS: FAA
Keene, NH 03431
Fakis: (603) 354-6533

Mt. Isbitaalka iyo Xarunta Caafimaadka Ascutney (Ascutney Hospital and Health Center)
Og: La taliyaha Dhaqaalaha
298 County Road
Windsor, VT 05089

Alice Peck Day Memorial Hosptial
10 Alice Peck Day Drive
FAA
Lebanon, NH 03766
Fakis: (603) 650-6142

Waxaad ka heli kartaa caawimo shaqsi ahaan dhammaystirka arjigan meelaha soo socda:

Dartmouth Hitchcock Xarunta Caafimaadka
One Medical Center Drive
Lebanon, NH 03756
(603) 650-6222

Dartmouth Hitchcock Clinics Manchester
100 Hitchcock Way
Manchester, NH 03104
(603) 629-8293

Cheshire Medical Center
580 Court Street
Keene, NH 03431
(603) 354-5430

New London Hospital
273 County Road
New London, NH 03257
(603) 526-5082

Dartmouth Hitchcock Clinics Concord
253 Pleasant Street
Concord, NH 03301
(603) 229-5080

Dartmouth Hitchcock Clinics Nashua
2300 Southwood Drive
Nashua, NH 03063
(603) 577-4055

Alice Peck Day Memorial Hosptial
10 Alice Peck Day Drive
Lebanon, NH 03766
(603) 308-0007

Mt. Isbitaalka iyo Xarunta Caafimaadka Ascutney (Ascutney Hospital and Health Center)
298 County Road
Windsor, VT 05089
(802) 674-7233

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Codsiga Kaalmada Maaliyadeed

1. Macluumaadka Bukaanka

Magaca Danbe | *Magaca Kowaad* | *Xarafka ugu horeeya Magaca Dhaxda ah* | *Lambarka Bulshada #* | *Taariikhda Dhalashada*

Ciwaanka Waddada | *Magaalada* | *Gobalka* | *Lambarka Zip* | *Waqtiga la dagnaa ciwaanka*

Ciwaanka boostada | *Magaalada* | *Gobalka* | *Lambarka Zip*

Lambarka Taleefanka Guriga | *Lambarka Taleefoonka Shaqada*

☐ *Kali* ☐ *Kala tagay* ☐ *Muwaadhin Mareekan ah* ☐ *Guursaday* ☐ *La furay* ☐ *Qof degan NH* ☐ *Midoobay* ☐ *Laga dhintay*

2. Qofka ka mas'uulka ka ah bixinta Biilka

Magaca Danbe | *Magaca Kowaad* | *Xarafka ugu horeeya Magaca Dhaxda ah* | *Lambarka Bulshada #* | *Taariikhda Dhalashada*

Ciwaanka haddii uu ka duwan yahay kan Bukaanka | *Lambarka Taleefanka Guriga* | *Lambarka Taleefoonka Shaqada*

Magaca Shirkadda Caymiska | *Taariikhda Billawga*

3. Fadlan sheeg DHAMMAAN dadka ku nool guriga, oo uu ku jiro codsadaha: Isticmaal xaashi dheeraad ah haddii loo baahdo

	Magaca	*Xirrirka kaala dhexeeya Bukaanka*	*Taariikhda Dhalashada*	*Lambarka Bulshada #*	*Codsanaya Haa/Maya*
1	**Naf**				
2					
3					
4					
5					
6					

4. Codsigan miyaa loogu talagalay mustaqbalka ama adeegyadii hore?

☐ Mustaqbalka ☐ Lasoo dhaafay *Taariikhda Adeegyada:* ____________________

5. Fadlan buuxi haddii qof qoyskaaga ka tirsan uu caymis leeyahay:

Caymiska caafimaadka (Qorshaha/Magaca), ____________ *Koontada kaydka caafimaadka (goobo) Haa Maya Qofkee:* ________

#/Aqoonsiga#Siyaasadda ____________________ *Qaddarka laga jari karo:* ____________________

Medicare Qaybta A ____, *Medicare Qaybta B*____, *Helaya caawimo lagu bixiyo Medicare Qaybta B* _____, *Qofkee:* ____________

6. Ma jiraa qof qoyskaaga ka tirsan oo dalbaday Medicaid? ☐ Haa ☐ Maya *Qofkee:* ____________

Haddi ay Haa tahay oo la diido fadlan geen nuqul ah ogaysiiska diidmada Medicaid.

7. Miyaad ka codsatay kaalmo dhaqaale xarun kale? ☐ Haa ☐ Maya *Haddii ay haa tahay, halkee:* ____________

8. Qof qoyskaad ka tirsan ma yahay uur? ☐ Haa ☐ Maya

9. Qof qoyskaada ka tirsan maka soo shaqeeyay militariga? ☐ Haa ☐ Maya *Qofkee:* ____________

10. Dhawaan miyaad xereysay magdhowga shaqaalaha ama dacwad ka dhan ah shil baabuur? ☐ Haa ☐ Maya
Taariikh: ____________________

11. Ma jiraa qof qoyskaada ka tirsan oo u qalma dheefaha sooshiyaal sekiyuuritiga? ☐ Haa ☐ Maya *Qofkee:* __

12. Ma jiraa qofkale oo kugu darsaday dakhliga canshuur celintiisa? ☐ Haa ☐ Maya *Qofkee:* ____________

13. Macluumaadka Hantida Qoyska

	Qofka 1	Qofka 2	Qofka 3
Magaca xubin kasta oo qoyska ka tirsan:	______________________	______________________	______________________
Magaca loo shaqeeyaha:	______________________	______________________	______________________
Dakhliga Guud ee Bisha ee Ka Imaanaysa:			
Shaqaalaysiinta:	$______________________	$______________________	$______________________
Iskii u shaqaysta:	$______________________	$______________________	$______________________
Akoonnada Maalgashiga:	$______________________	$______________________	$______________________
Kirada Guryaha:	$______________________	$______________________	$______________________
Shaqa la'aan ah:	*tan iyo MM / DD / YYYY*	*tan iyo MM / DD / YYYY*	*tan iyo MM / DD / YYYY*
Hawlgab: (Sooshiyaal Sekiyuuriti, Hawlgabka, Lacagta Sanadlaha la siiyo)	$______________________	$______________________	$______________________
Taageerada la siiyo Xaaska/Caruurta:	$______________________	$______________________	$______________________
Kaalmada Dawlada bixiso, Foojarada Cunnada:	$______________________	$______________________	$______________________
Dakhli Kale:	$______________________	$______________________	$______________________
Kaydinta iyo Maalgelinta:			
Haraaga Ku jira Akoonka Hubinta:	$______________________	$______________________	$______________________
Kaydka & Haraaga Akoonada CD-ga: (IRAs, 403B, 401K:)	$______________________	$______________________	$______________________
Sheeg: __________________	$______________________	$______________________	$______________________
Kaydinta iyo maalgashiga kale: Sheeg: __________________	$______________________	$______________________	$______________________

14. Kharashyada Ku Baxa Qooyska

Lacagta Lagu bixiyo Kirada Bisha: $________ Lacagta Deynta ee La bixiyo: $______ Hadhaaga Deynta ee Lagugu leeyahay $ ______________

Qadarka Canshuurta Guryaha Aan Lagu Darin Qadarka Lacag-bixinta ee kor ku qoran: $___________ Qiimaha Guriga: $ __________________

Ma leedahay Wax Hanti ah Marka Laga reebo Meesha aad Degan tahay? ☐ *Haa* ☐ *Maya*

Haddii ay Haa tahay, Qiimaha $ _______________Hadhaaga Deynta: $______________

Haddii hantida kale ay tahay ganacsi, sheeg ciwaanka: ________________________________ Bixinta Amaahda Bishii: $ __________________

Lagu Bixiyay: __________________________________ Sababta: ____

Medicare Qaybta D oo laga jaray jeegga Sooshiyaal Sekiyuuritiga: ☐ *Haa* ☐ *Maya Qadarka:$ ______________________________________*

Badeecooyinka $_______________Caymiska (Baabuurta/Noolaha/Hantida) $ __________________ Wax Kale: $ _______________________

Masruufka Cunugga/Xaaska $ _______________Qiimaha Caymiska Caafimaadka $ ______________________ Wax kale: $ _______________

Xannaanada Ilmaha $ ___________________ Biilasha Daryeelka Caafimaadka $ ______________________ Wax Kale: $ _________________

Nololeed (gaas, cunto, dhar) $ __________ Daawooyin $ _________________________________ Wax kale: $ ___________________________

Markaan saxiixa qaybta hoose waxaan oggolaanayaa codsiga warbixinta deyntayda iyo/ama canshuur celintayda. Waxaan fahamsanahay in canshuur celin loo baahan yahay si codsigan loo habeeyo iyo in macluumaad dheeraad ah la codsan karo ka hor inta aan la go'aamin u-qalmitaankayga. Haddii ay dhacdo in aanan si buuxda u shaacin, ama aan si khaldan u matalo, dakhli ama hanti kasta, heshiis kasta oo lagugu siinayo qiimo dhimis daryeel samafal waxa uu noqonayaa mid bura oo aan shaqaynaynin oo dib ayaa loola noqon doona ilaa taariikhda biilasha lagu leeyahay. Waxaa laga yaabaa in aan mas'uul ka noqdo kharash kasta/dhammaan kharashyada sharciga ah inta lagu jiro deyn ururinta.

Dhammaan xubnaha qoyska ee qaangaarka ah ee hoos saxiixa waxay oggolaadaan sii deynta wixii macluumaad caafimaad, maaliyadeed ama shaqo ah oo si toos ah ula xiriira daryeelkooda caafimaad ama u-qalmitaanka kaalmada maaliyadeed. Macluumaadkan waxaa laga yaabaa in lala wadaago qof kasta oo bixiye daryeel caafimaad kuwaas oo xubnaha qoysku ay ka raadsadeen adeegyo daryeel caafimaad ama kaalmo maaliyadeed. Dhammaan macluumaadka la bixiyay waxay ahaan doonaan kuwo sir ah oo hoos yimaada xeerarka HIPAA ee federaalka. Nidaamyada doorashada ayaa laga yaabaa inaan loo tixgelin kaalmo.

Waxaan aqbalay in aan dib u bixiyo abaal-marintii kaalmada maaliyadeed ee buuxda haddii aan helo caymiska lacag-bixinta nooc kasta ah ee adeegyada caafimaad ee uu ku jiro codsigan, tusaale ahaan lacagaha caymiska, lacag-bixinta barnaamijka dawladda, abaal-marinada laga helo dacwada ama lacag-bixin kasta oo kale.

Haddii aan helo Kaalmada Maaliyadeed, waxaan oggolahay inaan u sheego ururka meeshii aan markii ugu horreysay dalbaday isbeddel kasta oo saamayn kara u-qalmitaanka, oo ay ku jiraan isbeddellada tirada qoyska, dakhliga iyo caymiska caafimaadka. Waxaan fahamsanahay in haddii xaaladdeyda/caafimaadkeygu ay isbeddesho si aan aniga/anaga aan ugu qalmo barnaamijka kaalmada dawlada, waxaan u baahan doonaa inaan codsado barnaamijkaas oo aan keeno caddaynta codsiga.

Saxiixa Codsadaha ____Taariikh __________________

Saxiixa Qofka Ku soo Biiray ____Taariikh __________________