

## ABOUT ME

**MARK P SNEEP**

**Preferred Name:** Mark or Markie

**Assessment Date:** 03/03/2021

**Plan Dates:** 05/01/2021 to 04/30/2022

**Developed by:** Molly Henningsgard (651) 430-6500

**Address:** 7500 217th St N

Forest Lake, MN 55025

**County:** Washington

**Home:** (651) 464-6003

**Work:**

**Other:**

**General Plan Notes:**

CASE MANAGER NAME AND PHONE NUMBER: Chantelle Heifort-Adams (651-214-8696)

PROGRAM(S): Developmental Disabilities (DD) Waiver

PERSONAL CARE ASSISTANCE (PCA) HOURS/HOME CARE RATING: 12.5 Hours per Day/Z (Enhanced Rate Eligible)

DATE THIS DOCUMENT WAS MAILED: Mailed to Markie, Mark, and Maureen 3/5/21

**STRENGTHS, ROUTINES, & DREAMS:**

Mark, or Markie as his family and loved ones call him, is a lovable and happy person. Mark has a contagious laugh and a handsome smile. He is fun to be around. Mark is smart and remembers things. He knows the things he wants and doesn't, the things he likes and doesn't like, and will communicate with the people around him. Mark is a good listener and enjoys being part of the party. Mark has certain routines that are very important to him. When he gets home at the end of the day he likes to have his snack in his favorite spot in the living room, watch Family Feud at 6, Wheel of Fortune at 6:30, take a bath, and then go to bed. He always watches Barney as he falls asleep, even when staying at respite (his mom sends a portable DVD player). Mark goes to respite in Apple Valley 1 weekend a month and 2 weeks a year. He goes to his day program, PAI, Mondays through Fridays. Besides just being happy and being around people, Mark's dream is to have a pool in his backyard.

**SUPPORTS DISCUSSED:**

Mark receives a lot of support from his family, all of whom he is close with. He lives with his mom and dad, Mark and Maureen, and his brother, Anthony. Maureen is Mark's PCA. Because of COVID, he has not had any PCAs coming in the home but typically they are his mom's niece, her nephew, and her sister-in-law. His mom has had interest in finding another PCA that is a non-family member. When there are family gatherings and they need someone to help with Mark, family is not able to help as his PCA. This has been on hold during COVID but something Maureen hopes to look into this summer. Mark started the DD Waiver in December of 2019 in order to access respite. Respite was closed during COVID for a period of time, but has since opened and Mark has been going. He has been very happy going to PAI!

**PERSON INFORMATION**

Date of Birth: 04/21/1991 Age: 29 yrs

**Emergency Contacts**

Name	Relationship	Phone
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Name	Relationship	Phone
Mark & Maureen Sneep	Parent	(651) 464-6003

**Notes/Comments**

Maureen's cell is 651-470-5862.

**Decision Making Representatives**

Name	Type of Authority	Address	Phone
Mark and Maureen Sneep	Private Guardian	7500 217th Street North, Forest Lake, MN 55025	(651) 464-6003

**Notes/Comments**

Mark has historically been the responsible party for PCA services.

**Health Insurance & Payers**

Is the person certified disabled by Social Security or through the State Medical Review Team (SMRT) process? Yes

Is the person on medical assistance? Yes

Type	Describe	Policy Number	Effective Date
Other	Express Scripts	801070510	09/01/2011
Private Insurance			
Managed Care	MEDICA SNBC	Unknown	05/01/2012
Medical Assistance	Dx Disabled/No Sub-Type	01160413	07/01/2012

**Notes/Comments**

Mark's financial worker with Washington County is Renee Kenowski (651-275-7297). Mark's mom is not sure who his current MEDICA Care Manager is as this person changes frequently.

**Providers**

Health Care Providers	Phone	Comments
Primary Physician	(651) 464-7100	Dr. Brent Salek/Allina Forest Lake

Health Care Providers	Phone	Comments
Specialty Clinic	(651) 221-9051	Dr. Hoj/Neurological Associates/Sees Annually
Pharmacy	(651) 464-1994	CVS in both Forest Lake (number listed) and White Bear Lake
Other	(651) 690-5353	St. Paul/PCA Agency
Abbeycare Choice, Inc.		
Other	(612) 718-9864	Stillwater/Bluestone Physician Services
MEDICA SNBC Care Coordinator		

**Notes/Comments****WHAT'S IMPORTANT TO THE INDIVIDUAL****Goals related to how you want to live your life:**

**Quality of Life:** Mark wants to live a happy life and be as happy as he can be; being happy is something that is most important to him. He wants to be around people and hear people talk, whether it's at home, out and about, or at his day program. Being around people and seeing things are important to him. Mark wants to move around and not stay in the same place; having attention, doing things, seeing things, and going places are all important to him and make him happy. He wants to continue to watch Barney while he's lying in bed and going to sleep because this is part of his routine and Barney is calming to him.

**Activities of Daily Living:** It is important to Mark to take a bath every night because he likes it and it is part of his routine. He wants to be pushed in his wheelchair because this is something he loves.

**Instrumental Activities of Daily Living:** It is important to Mark to not have any pieces of food in what he eats (i.e. no pieces of fruit in yogurt) and that he have a snack every day when he gets home. It is important to him to get to go shopping with his mom or dad because he loves getting out and being around people.

**Health:** It is important to Mark to feel comfortable because when he's comfortable he is happy.

**Psychosocial:** It is important to Mark that people are not in his space, that he's not around loud and unfamiliar noises, and that people understand his preferences and what he is trying to communicate. Being able to watch Barney is important to Mark because it is almost always calming for him.

**Memory & Cognition:** Mark's mom did not identify something important to him in this area.

**Safety & Self-Preservation:** Mark's mom did not identify something important to him in this area.

**Sensory & Communication:** It is important to Mark that people try to understand what he is communicating.

**Employment, Volunteering & Training:** It is important to Mark to be in a place where he can hear people and be around people. He loves and wants to continue to receive special attention from people at PAI, or anywhere where he gets to do fun things, go fun places, and be around people.

**Housing & Environment:** Mark's home, where he is around familiar people and his routine, is important to him.

**Self-Direction:** Mark's mom did not identify something important to him in this area.

**Caregiver:** N/A

## Short and Long-Term Goals

Goal Statement	Target Date	Provider & NPI (if applicable)	Frequency of Reporting
Mark wants to do fun things, go fun places, see things, be around people, and receive attention from people because these things make him happy and he wants to be as happy as he can be.	04/30/2022		As determined by the team
Mark wants to lay in bed and watch Barney every night when he falls asleep, even when he's at respite, because this is an important part of his routine and is calming to him.	04/30/2022		As determined by the team

## Action Steps for Goals:

**What will the person do?** Mark will continue to express his preferences, desires, wishes, dislikes, and dreams, as he is able. Mark will participate in his service planning as he is able.

### **What will the case manager do?**

Mark's case manager will provide ongoing support, encouragement, advocacy, monitoring and coordination of services, and access to additional supports and resources, as available and appropriate, to support his preferences, needs, desires, and identified outcomes.

### **What will others do?**

Mark's parents will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources, as available and appropriate, to support his preferences, needs, desires, and identified outcomes.

### **What will the provider do?**

Mark's PCAs, vocational, and respite providers will provide ongoing support, encouragement, advocacy, coordination of services, and access to additional supports and resources, as available and appropriate, to support his preferences, needs, desires, and identified outcomes.

## **SUMMARY OF NEEDS**

**Quality of Life:** Mark is not able to communicate with words. His mom and primary caregiver, Maureen, provided information about Mark's preferences, outcomes, likes, and dislikes. A bad day for Mark is when he wakes up "cranky" and then is "cranky the whole day." Maureen thinks he may get stomach aches because he doesn't move much and he can get frustrated because he can't communicate what he wants to say. When Mark has to go to the bathroom it is painful and can make him frustrated and upset. A good day for Mark is when he wakes up and ends his day "being happy." A happy day is when he gets to go somewhere fun. Mark likes music (all kinds) and to watch his favorite shows on TV. These are Barney, Family Feud, Wheel of Fortune, Trolls, and The Voice. Mark likes swimming and dogs. Mark's family no longer has dogs but he loves when he gets to see his sister's dog. He loves his swing and loves to be pushed around in his wheelchair. During COVID, Mark has really started to enjoy listening to Wii bowling and golf! Mark likes to go for walks, go for pontoon rides, and go to the store. Mark likes going to the mall and loves going to the Mall of America at Christmas, though hasn't been able to get out due to COVID. He really likes going to his new day program, Phoenix Alternatives Inc (PAI)! Mark likes to be around people in general. He especially likes to be around his dad and his uncles. Mark likes to be around his sister and brother, and close relatives. Interactions with family were limited over the last year because of COVID and Mark being so high risk. Mark has really enjoyed being around people at PAI and having those interactions,

especially after having to isolate so much during COVID. Generally, Mark likes to be around people, listen to people, and to have people pay attention to him and do fun things with him.

**Personal Assistance:** Mark will let people who help him know his preferences with personal cares. He needs support with all of his personal cares. **EATING:** Mark enjoys eating the foods he likes and has certain snacks he likes to have when he gets home for the day. Mark has dysphagia and all of his foods must be pureed. He needs someone to feed him. Mark receives Ensure 8 times a day; 85% of his diet is Ensure. He does not like to chew. For example, if he is given yogurt with even a small piece of fruit, he won't eat it. **BATHING:** Mark takes a bath every night and loves the jets in the jacuzzi tub. He needs help with all parts of bathing. He has a bath chair and hand-held shower. He was provided a new bath lift in 2017. **DRESSING:** Mark can somewhat lift his right arm into the sleeve of his shirt or jacket and can now lift his feet to put them in his shoes. Mark needs total support with dressing.

**GROOMING:** Mark does not like having his teeth brushed or shaving, and needs two people to help him with these things. He has an electric toothbrush and an electric shaver. Mark also does not like having his nails trimmed. His family won't do two things in one night. For example, one night Mark's parents shave him and the next night they will trim his fingernails to space out these cares that he does not enjoy. **TOILETING:** Mark needs support with toileting. He wears incontinence products at all times and has a bowel program that happens every night. **MOBILITY:** Mark got a customized manual wheelchair in 2019 that has a tilt feature. He loves it and it is very comfortable for him. Someone needs to push Mark in his chair, which he loves. His parents installed an elevator in the home, which allows Mark to get to the lower level and use the hot tub. **POSITIONING:** Mark prefers to sleep on his right side and sometimes can position himself that way, but he sometimes needs his mom or dad to reposition him at night. There is no specific positioning schedule; sometimes Mark sleeps through the night and sometimes his mom or dad need to reposition him up to 5 times during the night. He needs help sitting up and repositioning. He has a hospital bed. **TRANSFERS:** Mark's family got a hooyer that raises high enough to get him in his favorite spot in the living room. His mom doesn't always use it; sometimes it is easier for Mark's mom to just pick him up to transfer him, though she said she knows she shouldn't do that because of her back. He used to be able to bear weight with transfers but can't do this anymore.

**Home Management:** Mark's school and day programs have both tried to help him learn and participate in home management tasks, like cooking and cleaning. Mark is not able to hold anything with his hands and he found this to be very frustrating. Mark needs support with daily living and home management tasks. **MEDICATION MANAGEMENT:** Mark takes his medications with a drink and most of the time takes them pretty well. He needs someone to help him with all aspects of his medications. **MEAL PREPARATION:** Mark indicates his preferences with the things he eats. Mark will not eat foods with pieces in it that would require him to chew (i.e. yogurt with small pieces of fruit). Mark has dysphagia and needs all foods to be pureed. **TRANSPORTATION:** Mark needs complete support with transportation. The family van has been modified. Mark loves to go for rides. **HOUSEWORK:** Mark needs complete support with housework and laundry. **TELEPHONE USE:** If someone holds the phone up to his ear, Mark can listen. He will listen to his dad talk with him on the phone, but only for a few moments. Mark is otherwise not able to use the phone. **SHOPPING:** Mark enjoys going shopping. His mom manages all of his shopping needs. **FINANCES:** Mark needs complete support with his finances. Mark's parents manage his finances.

**Health Related/Medical:** Mark's diagnoses include hypotonic cerebral palsy, severe intellectual disability, constipation,

contractures, and seizure disorder. Mark's mom suspects he experiences stomach aches due to not moving much, which can make him upset and affect his sleep. He has a history of reflux. Mark's team feels he experiences muscle cramping in his legs, which contributes to discomfort and possibly why Mark does not bear weight with transfers anymore. Mark goes to the dentist every 4 months because it is hard to get in his mouth to brush his teeth and he dislikes people helping him with oral cares. Mark had dental surgery when he was young. Mark's mom rated his health as good and denies immediate health concerns. He has been healthy this year with no colds; Mark did not have any PCAs coming in during COVID due to his risk status. Mark does not receive certain vaccinations or the flu shot. Mark needs someone to coordinate all of his healthcare needs. Mark has a bowel program that occurs daily. He receives a rectal suppository nightly. Mark has dysphagia and needs supervision with eating and to follow a pureed diet. Mark's last seizure was in the fall of 2020. His Keppra levels are drawn twice a year. Mark's caregivers do range of motion with him daily; his mom is going to talk to PAI about them helping with this on days he is there. Mark can't use words to communicate if he is in pain. He will yell, bite his finger, bang his head, etc. Mark's sleep is erratic. Mark can get up up to 5 times a night, at times more than half the days of the week. This happens even with him being up to 10 mg of Melatonin. When he wakes up, Mark's parents try to do things to make him happy, distract him (i.e. a movie), or adjust him. His mom feels that sometimes it is because his stomach hurts. The other nights Mark sleeps really well.

**Cognitive and Behavior Supports:** Overall, Mark is a very happy person! His mom shared that his mood can be "up and down." Mark can't communicate with words and can get frustrated when he's trying to express himself or communicate, if people are in his space, or if he is not able to do something he wants to do. Many times Mark's mom thinks he is upset because he's uncomfortable or because his stomach hurts, and not sleeping well the night before can affect his mood the next day. It can be helpful to put Mark on his bed or on the couch to relax. Watching Barney is almost always calming to Mark. Mark bites his fingers and bangs his head when he's upset or trying to express himself. At times, he tries to purposely slide out of his chair. Mark will grab and not let go or hit people that get in his space or within arm's reach. Mark will scream if he is having a bad day. Sometimes distracting him with something fun does not work and he needs help leaving the room. He is resistive to having his teeth brushed and to shaving; this can take two people at times. Mark can get upset quickly for no apparent reason. He can go from happy and laughing to then suddenly screaming. He can become easily agitated, angered, and frustrated.; Mark is diagnosed with severe intellectual disability and cerebral palsy. He was last assessed August 7, 2003 and received a full scale IQ (FSIQ) of 40. Mark has been determined eligible for Rule 185 Case Management or Intellectual and Developmental Disabilities (IDD) services by Washington County. There are no changes or concerns with Mark's memory or cognition.

**Personal Security:** Mark's mom believes he feels safe at home and out of the home. Mark is not able to get help during an emergency. Someone is with him at all times and would get help should there be an emergency. There are no concerns about abuse, neglect, or exploitation. Mark would not be able to report if he was being mistreated but his mom thinks he would be upset or act differently if something was going on. Mark is not able to respond appropriately to a potentially harmful situation. He needs a 24 hour plan of care to stay safe, healthy, and happy. Mark needs someone available to assist him during the night. While there are some nights that Mark sleeps through the night, many nights during the week he needs support with calming or repositioning up to 5 times. Mark needs someone with him at all times when participating in leisure and recreation activities. Mark is at risk of self-

neglect and is a vulnerable adult.

**Communications:** VISION: Mark has a vision loss due to oculomotor apraxia and exotropia which results in blurred vision. Mark's mom said he has astigmatism. He should wear glasses but won't keep them on. HEARING: Mark's hearing is very good. COMMUNICATION: Mark cannot communicate using words. He will laugh or clap when happy, yell or scream when mad or when he wants something. People who know Mark and know his routine well are best able to figure out what it is he wants. Mark's mom said he understands maybe 10% of a conversation. He knows a few words he hears such as pontoon or car or camp (respite). SENSORY: Mark is upset by loud and unfamiliar noises. He responds to being upset or frustrated by biting his finger or banging his head.

**Employment/Training/Skill Building:** Mark had been at Rise in Forest Lake for about 6 years. He started after he completed transition programming. During COVID, Rise was only able to take for a walk for an hour twice a week. Mark transitioned to PAI in 2020 and loves it! He goes 5 days a week and loves to be around people, listen to interactions, and has also done some crafts. Mark's mom thinks the bigger building and more room to spread out is something else that Mark likes. He does not do work tasks because he is not able to. The routine of going, being around people, and riding in the van are all things he loves and are meaningful to him. Mark went through the Forest Lake School system and graduated from high school. He completed the STEP program in Forest Lake through age 21. Mark's team at STEP really, really tried to get him to engage in activities that would support him working (i.e. learn to hit a can so he could do recycling), but Mark was never interested. Mark is not able to work because of fine motor difficulties and because he is not interested in doing work tasks. At this time, Mark's mom is happy with Mark being able to get attention from staff and other people at PAI, and that he is enjoying being around people there. She knows she can talk to Mark's case manager should they ever wish to pursue anything different for how Mark spends his days.

**Supportive Services:** Mark lives with his mom and dad, Mark and Maureen, and his brother, Anthony, in their home in Forest Lake, MN. Mark's mom said she believes Mark "likes coming home to familiar faces", as well as familiar sounds and familiar routines. In 2019 they finished adding on to their home and Mark now has his own room with his own elevator. He loves it! He gets mad when his brother goes in his room. Mark's mom said, "Our plan is to keep him home as long as possible - as long as there is respite."

**Self-Direction:** Mark is not able to direct his care and services, though he does indicate his preferences with things on a daily basis. Mark's parents, Mark and Maureen, are his legal guardians. Mark's dad is the responsible party for his PCA services. This assessor will send information about Mark's eligibility for PCA Enhanced Rate for Mark.

**Caregiver/Parent Support:** Mark's parents, Mark and Maureen, are his primary supports and caregivers. Mark has a very supportive family. Typically, family members are his PCAs. Because of COVID and Mark being high risk, as well as his sister being pregnant and then a new mom, he has not had any PCAs coming in the home this past year. Mark's mom has said Mark will stay at home with them as long as possible, as long as there is respite. Mark started a respite in Apple Valley with Companion Linc in 2019. He seems to love it! Aside from closures due to the pandemic, Mark typically goes 1 weekend a month and twice a year for 1 week. The caregiver questionnaire was provided to Mark's mom and dad with a self-addressed stamped envelope to complete and return, if they choose.

## RECOMMENDED REFERRALS

- Quality of Life:** Referrals Needed: Other - None needed
- Activities of Daily Living:** Referrals Needed: Other - None needed
- Instrumental Activities of Daily Living:** Referrals Needed: Other - None needed
- Health:** Referrals Needed: Other - None needed
- Psychosocial:** Referrals Needed: Other - None needed
- Memory & Cognition:** Referrals Needed: Other - None needed
- Safety & Self Preservation:** Referrals Needed: Other - None needed
- Sensory & Communication:** Referrals Needed: Other - None needed
- Employment/Volunteering/Training:** Referrals Needed: Other - None needed
- Housing & Environment:** Referrals Needed: Other - None needed
- Self-Direction:** Referrals Needed: Other - None needed
- Caregiver:** Referrals Needed: Other - None needed

## INFORMAL CAREGIVERS

Name	Caregiver Relationship	Lives with Person	Caregiver Role	Type of Care
Mark and Maureen Sneep	Parent	<input checked="" type="checkbox"/>	Primary Caregiver	<input checked="" type="checkbox"/> ADLs <input checked="" type="checkbox"/> IADLs <input checked="" type="checkbox"/> Habilitation <input checked="" type="checkbox"/> Community Access <input checked="" type="checkbox"/> Supervision <input checked="" type="checkbox"/> Social Interaction <input checked="" type="checkbox"/> Health & Medical

### Notes/Comments

Mark's parents, Mark and Maureen, are his primary supports and caregivers. Mark has a very supportive family. Typically, family members are his PCAs. Because of COVID and Mark being high risk, as well as his sister being pregnant and then a new mom, he has not had any PCAs coming in the home this past year. Mark's mom has said Mark will stay at home with them as long as possible, as long as there is respite. Mark started a respite in Apple Valley with Companion Linc in 2019. He seems to love it! Aside from closures due to the pandemic, Mark typically goes 1 weekend a month and twice a year for 1 week. The caregiver questionnaire was provided to Mark's mom and dad with a self-addressed stamped envelope to complete and return, if they choose.

## **RISKS**

### **How will Health and Safety Issues be Addressed?**

Mark will continue to receive 24 hour support and supervision both formally and naturally through his parents, PCAs, other family, supports at PAI, and supports at respite. His team will ensure Mark is safe, healthy, and happy. Mark's parents will continue to provide supported decision-making as his guardians.

## **NEXT STEPS:**

- You will work with an assessor or case manager to develop a Coordinated Services and Supports Plan for the public program you have chosen.**
- We are waiting for:**
- For help locating services and supports options in this Community Support Plan, these are resources you can contact:**
  - [www.Minnesotahelp.info](http://www.Minnesotahelp.info)®
  - Disability Linkage Line® (Hub) 866-333-2466
  - Senior LinkAge Line® (SLL) 800-333-2433
  - Veterans Linkage Line™ (VLL) 888-546-5838

### **Comments:**

N/A

# APPEAL INFORMATION

If you are dissatisfied with the county agency/tribe or managed care organization's action, or feel they have failed to act on your request for home and community based services, you have the right to appeal within 30 days to your agency\*, or write directly to:

Minnesota Department of Human Services Appeals Office  
P. O. Box 64941  
St. Paul, MN 55164-0941

**Call:**  
Metro: 651-431-3600 (Voice)  
Outstate: 651-657-3510  
TTY: 800-627-3529  
Fax: 651-431-7523

**Online filing:**  
<http://edocs.dhs.state.mn.us/lfsrver/Public/DHS-0033-ENG-eform>

If you want to have your services continue during an appeal, you must file within 10 days after you receive a notice from your agency about a reduction, denial or termination of your services.

If you show good cause for not appealing within the 30-day limit, the state agency can accept your appeal for up to 90 days from the date you receive the notice.

\* If you are enrolled in a managed care organization you also have the option to appeal directly with your managed care organization.

## What if I feel I have been discriminated against?

Discrimination is against the law. You have the right to file a complaint if you believe you were discriminated against because of race, color, national origin, religion, creed, sex, sexual orientation, public assistance status, age or disability. To file a complaint, contact:

- Minnesota Department of Human Services  
Equal Opportunity and Access Division  
P.O. Box 64997  
St. Paul, MN 55164-0997  
Call 651-431-3040 (voice); or Minnesota Relay at 711 or 800-627-3529 (toll-free).
- Minnesota Department of Human Rights  
Freeman Building  
625 N. Robert St.  
St. Paul, MN 55155  
Call 651-539-1100 (voice), 651-296-1283 (TTY) or 800-657-3704 (toll-free).

U.S. Department of Health and Human Services' Office for Civil Rights prohibits discrimination in its programs because of race, color, national origin, disability, age, religion or sex. Contact the federal agency directly at U.S. Department of Health and Human Services Office for Civil Rights, Region V, 233 N. Michigan Ave. Suite 240, Chicago, IL, 60601. Call 312-886-2359 (voice), 800-537-7697 (TTY) or 800-368-1019 (toll-free).

**651-431-2400 or 800-747-5484**

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

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

កំណត់សំគាល់: ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមទូរស័ព្ទលេខទូរស័ព្ទខាងលើ ។

Pažnja. Ako vam treba besplatna pomoć za tumačenje ovog dokumenta, nazovite gore naveden broj.

Thov ua twb zoo nyecm. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ໄປຮອດຊາບ. ຖ້າທ່ານ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ຟຣີ, ຈົ່ງໂທໄປທີ່ພາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun bilisa akka siif hiikamu gargaarsa hoo feete. lakkoobsa gubbatti kenname bibili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý: Nếu quý vj cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

LB3-0008 (3.13)

This information is available in accessible formats for individuals with disabilities by calling 651-431-2600, toll-free 800-882-6262, or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.