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Health-Related Social Needs (HRSN) Fee Schedules

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HRSN Home Changes for Health Supports (formerly Climate) Fee Schedule, effective July 1, 2024

Code	Modifier	Service Description	Unit[1]	OHA Expected Unit Costs	Rate[2,3]
S5165	U1: HRSN Waiver Program V1: Air Conditioner	Air conditioner, including delivery	Per Item	$680.00	Actual cost, maximum of 150% of expected cost
T2029	U1: HRSN Waiver Program	Air filtration device, including delivery	Per Item	$500.00	Actual cost, maximum of 150% of expected cost
T2028	U1: HRSN Waiver Program TS: Follow-Up Service	Air filter replacement, including delivery	Per Item	$70.00	Actual cost, maximum of 150% of expected cost
S5165	U1: HRSN Waiver Program V3: Generator	Portable power supply, including delivery	Per Item	$1,590.00	Actual cost, maximum of 150% of expected cost
S5165	U1: HRSN Waiver Program V4: Heater	Heater, including delivery	Per Item	$290.00	Actual cost, maximum of 150% of expected cost
S5165	U1: HRSN Waiver Program V2: Refrigerator	Mini refrigerator, including delivery	Per Item	$170.00	Actual cost, maximum of 150% of expected cost

Code	Modifier	Service Description	Unit[1]	OHA Expected Unit Costs	Rate[2,3]
S5165	U1: HRSN Waiver Program NU: New Equipment	Device installation	Per 15 Minutes	$12.50	$12.50 per unit

1) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.
2) Rates listed as "Actual cost, maximum of 150% expected cost" will have an upper payment limit of 150% of the OHA Expected Unit Costs listed for that service.
    a) For example, the upper payment limit for Heater, including delivery, is $435 ($290 x 1.5). The 150% factor is to allow for variation in device and shipping costs over time and across geographies.
3) A 2% MCO tax load will be added to all payments included in the fee schedule.

HRSN Housing Supports Fee Schedule Part 1, effective Nov. 1, 2025

All items in this part of the fee schedule should be billed at a rate[3,4] equal to the actual cost, up to a maximum of 150% of the listed OHA Expected Unit Costs.

Rent codes and OHA Expected Unit Costs

Code: H0043 (Rent and Utility Costs, Per Day)

Modifiers	Region A[2]	Region B[2]	Region C[2]	Region D[2]	Region E[2]
U1: HRSN Waiver Program U2: 0-1 Bedroom Unit	$62.50	$51.25	$43.04	$36.43	$29.82
U1: HRSN Waiver Program U3: 2-Bedroom Unit	$71.43	$67.32	$55.18	$45.00	$36.96
U1: HRSN Waiver Program U4: 3+ Bedroom Unit	$97.86	$94.29	$76.79	$63.04	$51.79

Code: H0044 (Rent and Utility Costs, Per Month)

Modifiers	Region A	Region B	Region C	Region D	Region E
U1: HRSN Waiver Program U2: 0-1 Bedroom Unit	$1,750.00	$1,435.00	$1,205.00	$1,020.00	$835.00
U1: HRSN Waiver Program U3: 2-Bedroom Unit	$2,000.00	$1,885.00	$1,545.00	$1,260.00	$1,035.00
U1: HRSN Waiver Program U4: 3+ Bedroom Unit	$2,740.00	$2,640.00	$2,150.00	$1,765.00	$1,450.00

Utilities codes and OHA Expected Unit Costs

Code: T2035 (Utilities Arrears, Per Month)

Modifiers	# Bedrooms	Region A	Region B	Region C	Region D	Region E
U1: HRSN Waiver Program	0-1	$700.00	$574.00	$482.00	$408.00	$334.00
U1: HRSN Waiver Program	2	$800.00	$754.00	$618.00	$504.00	$414.00
U1: HRSN Waiver Program	3	$1,096.00	$1,056.00	$860.00	$706.00	$580.00

Code: T2035 (Utilities Set Up, Per Instance)

Modifiers	Region A	Region B	Region C	Region D	Region E
U1: HRSN Waiver Program U2: 0-1 Bedroom Unit	$934.00	$808.00	$716.00	$642.00	$568.00
U1: HRSN Waiver Program U3: 2-Bedroom Unit	$1,034.00	$988.00	$852.00	$738.00	$648.00
U1: HRSN Waiver Program U4: 3+ Bedroom Unit	$1,330.00	$1,290.00	$1,094.00	$940.00	$814.00

Other supports

Code	Modifiers	Service Description	Unit[1]	Rate
H0043	U1: HRSN Waiver Program KR: Rental Item, Billing for Partial Month	Hotel/Motel Stays	Per Day	$90.00
T2038	U1: HRSN Waiver Program	Storage Fees	Per Month	$135.00

1) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.
2) The region groupings of counties are below and are subject to change.
    a) Clackamas, Columbia, Multnomah, Washington, and Yamhill
    b) Hood River, Wasco, Benton, and Deschutes
    c) Marion, Polk, Lane, Clatsop, Jackson, Linn, Lincoln, and Josephine
    d) Curry, Tillamook, Crook, Gilliam, Coos, Douglas, Sherman, Jefferson, Union, Umatilla, and Klamath
    e) Lake, Wallowa, Malheur, Grant, Baker, Morrow, Wheeler, and Harney
3) All rates listed in the section above will have an upper payment limit of 150% of the OHA Expected Unit Costs. For example, the upper payment limit for Utilities Set-Up, 0-1 Bedroom, Region A is $1,401 ($934 x 1.5).
4) A 2% MCO tax load will be added to all payments included in the fee schedule.

HRSN Housing Supports Fee Schedule Part 2, effective Nov. 1, 2025

Home Changes for Safety

Code	Modifier	Service Description	Unit[1]	OHA Expected Unit Costs	Rate[2,3]
S5165	UB: Home Modifications U1: HRSN Waiver Program	Medically Necessary Home Accessibility Modifications	Per Member	$5,000	Actual cost, maximum of 150% of expected cost
S5165	U9: Household Services U1: HRSN Waiver Program	Medically Necessary Home Remediations	Per Member	$3,350	Actual cost, maximum of 150% of expected cost

Tenancy Support Services[4]

Code	Modifier	Unit[1]	Housing Type	Rate[2,3]
H2015	U1: HRSN Waiver Program UA: Education and Training	Per 15 Minutes	All Units	$26.00 per unit
H2016	U1: HRSN Waiver Program SE: Low complexity	Per Month	Post-Housing, Low Complexity	$311.00 per unit
H2016	U1: HRSN Waiver Program U8: High complexity	Per Month	Post-Housing, High Complexity	$373.00 per unit

1) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.
2) A 2% MCO tax load will be added to all payments included in the fee schedule.
3) Rates listed as "Actual cost, maximum of 150% of expected costs" will have an upper payment limit of 150% of the OHA Expected Unit Costs. For example, the upper payment limit for Medically Necessary Home Remediations is $5,025 ($3,350 x 1.5).
4) The Tenancy Support Services rate per month is only intended for HRSN provider organizations that have agreements with the CCO and the member to use the per month rate.

HRSN Nutrition Supports Fee Schedule, effective July 1, 2026

Code	Modifiers	Service Description	Unit[1]	OHA Expected Unit Costs	Rate[2,3]
98961	U1: HRSN Waiver Program UC: Nutrition	Nutrition Education	Per 30 Minutes	$25.00	$25.00 per unit
S5170	U1: HRSN Waiver Program U9: Household Services	Medically Tailored Meals	Per Meal	$12.25	Actual cost, maximum of 100% of expected cost
S5170	U1: HRSN Waiver Program U5: Direct Member Purchase	Pantry Stocking Card	Per Week	$70.00	Actual cost, maximum of 100% of expected cost
S5170	U1: HRSN Waiver Program U8: Weekly Delivery	Pantry Stocking Box	Per Week	$99.75	Actual cost, maximum of 100% of expected cost
T2025	U1: HRSN Waiver Program U5: Direct Member Purchase	Fruit and Vegetable Benefit Card	Per Week	$31.85	Actual cost, maximum of 100% of expected cost
T2025	U1: HRSN Waiver Program U8: Weekly Delivery	Fruit and Vegetable Benefit Box	Per Week	$53.55	Actual cost, maximum of 100% of expected cost

1) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.
2) A 2% MCO tax load will be added to all payments included in the fee schedule.
3) Rates listed as “Actual cost, maximum of 100% of expected costs” have an upper payment limit of 100% of the OHA Expected Unit Costs.

HRSN CCO Variable Admin Fee Schedule, effective Jan. 1, 2026

CCO admin payments[1] compensate CCOs for required administrative tasks based on the CCO's contract with the state. These tasks include case management, outreach and engagement, screenings, provider network management, payment and claims processing, member services, and overhead.

Code	Modifiers	Service Description	Unit[2]	OHA Maximum Allowable Unit Costs	Rate[3]
99499	U9: Household Services U1: HRSN Waiver Program	Housing Supports[5]	Per Instance	$366.00	$366.00 per unit

1) In addition to variable admin, CCOs receive a fixed per member per month (PMPM) admin payment for all their CCO-A and CCO-B assigned members. Below are the rates for CY2026:

CCO Tier	OHP Fixed PMPM	HOP Fixed PMPM
Tier 1	$1.06	$0.30
Tier 2	$1.34	$0.38
Tier 3	$2.39	$0.68

2) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.

3) A 2% MCO tax load will be added to all payments included in the fee schedule.

4) Housing Supports CCO Variable Admin is payable associated with claims for each of the following:

   a) The first month of rent and utility costs per member

   b) The first instance of medically necessary home accessibility modifications per member, and

   c) The first instance of medically necessary home remediations per member.

HRSN Outreach and Engagement Admin Fee Schedule, effective Nov. 1, 2025

Code	Modifiers	Service Description	Unit[1]	OHA Maximum Allowable Unit Costs	Rate[2]
T1017	U1: HRSN Waiver Program UD: Outreach and Engagement	Outreach and Engagement by CBO or HRSN Provider[3]	Per 15 Minutes	$26.00	$26.00 per unit

1) All services are limited based on audit limits set by the State in the CCO HRSN Guidance Document.
2) A 2% MCO tax load will be added to all payments included in the fee schedule.
3) Billable Outreach and Engagement services are performed by HRSN Service Providers. This activity is billable for OHP members who are presumed eligible for HRSN services and/or for OHP members who are receiving HRSN Home Modifications or HRSN Home Remediations and do not quality for HRSN Tenancy Services.

Medicaid Division
1115 Waiver Strategic Operations
800 NE Oregon St, Suite 715
Portland, OR 97232
503-580-0295
HRSN.Program@oha.oregon.gov
https://www.oregon.gov/oha/hsd/medicaid-policy/pages/hrsn.aspx