

HRSN Billing Guide

This HRSN Billing Guide is for supporting Coordinated Care Organizations (CCOs) in creating encounter claims that are submitted to the Oregon Health Authority (OHA) for reimbursement and to substantiate payment for services that are at-risk to CCOs. This billing guide is also intended for HRSN service providers to support invoicing of billable time and services.

CCOs Using this Billing Guidance

- CCOs are responsible for developing and submitting encounters to OHA. HRSN service providers are not required to submit **claims** directly to OHA or a CCO to perform HRSN services. HRSN service providers submit invoices directly to OHA or the CCO they are contracted with.
- CCOs may request documentation or invoices to match the billing guide to ensure encounters submitted to OHA meet the following specifications. This guidance can be used by CCOs to create their own billing guidance for HRSN service providers to submit invoices.
- Prior to submitting encounters, CCOs are required to have paid the HRSN service provider for the HRSN service rendered.

HRSN Service Providers Using this Billing Guidance

- HRSN service providers who are contracted with a CCO may be required by the CCO to submit certain documentation when submitting invoices or to use a particular system to submit invoices.
- HRSN service providers who contract with CCOs should contact the CCO if they have questions about the system(s) the CCO uses for billing or for billing issues.

Questions?

For answers to frequently asked billing questions, please see the CCO HRSN FAQ that is published on the [CCO Contract Forms page](#).

Table of Contents

HRSN Billing Guide	1
CCOs Using this Billing Guidance	1
HRSN Service Providers Using this Billing Guidance	1
Questions?	2
Fee Schedule Overview	3
Billing Codes, Modifiers, and Technical Submission.....	4
Rent and Utility Financial Assistance	8
Other Housing Services	26
Outreach & Engagement and Tenancy Services	27
Pantry Stocking and Fruit & Vegetable	32
Other Nutrition Services	49
Resources	50
Appendices.....	50

Fee Schedule Overview

A fee schedule is a list of maximum rates to reimburse providers for specific services. The fee schedule outlines what OHA will reimburse for each HRSN service.

- If an HRSN service provider provides a service to an OHA member enrolled in a coordinated care organization (CCO), the CCO is responsible for reimbursing the provider according to the fee schedule.
- If an HRSN service provider provides a service to an OHA member enrolled in Open Card, they will be paid directly from OHA, in accordance with the fee schedule.

Fee Schedule Development Process

The fee schedule is based upon an assessment of several different factors, including reviewing already established Medicaid services, as well as services provided by other programs and agencies, such as the U.S. Department of Housing and Urban Development (HUD). For more information on the fee schedule development process, reach out to HRSN.Program@oha.oregon.gov.

HRSN Fee Schedules

The HRSN fee schedules are on the [HRSN service provider webpage](#). There are separate fee schedules for each HRSN service, including nutrition, housing, home changes for health, and outreach & engagement. Each fee schedule lists procedure codes, modifiers, service descriptions, units, allowable costs or expected costs, and rates. The HRSN fee schedules include different types of rate limits. Details for how each rate works, as well as some of the terminology on the fee schedule, are included below:

- **Actual cost, up to 150% of expected cost**
 - The **expected cost** is the standard amount set by OHA for a service. The **upper payment limit (UPL)** is the most that OHA will pay (150% or 1.5x the expected cost). Providers will get reimbursed for their **actual cost**, but no more than 150% of the expected cost.

- Additionally, while the upper payment limit for rent and utility financial assistance may vary (e.g., by region or bedroom size), the upper payment limit will always be 150% of the listed expected cost.
- **Actual cost, maximum of 100% of expected cost**
 - The upper payment limit is set at **100% of the expected cost**, or **equal to** the listed OHA expected unit cost,
 - This means providers are reimbursed for their **actual cost** but no more than the upper payment limit. If your actual costs are lower, they're paid the lower amount.
- **OHA maximum allowable unit costs**
 - This is the maximum amount that can be billed for a service. Providers cannot bill more than this amount, even if the actual cost is higher.
 - **For example:** Outreach and engagement (O&E) services have a set maximum, per-unit rate listed in the fee schedule.
- **Summary**
 - All claims will only be paid up to the upper payment limit or the maximum allowable unit cost.
 - If providers bill for more than the allowed amount, they will be paid the amount listed on the fee schedule.

Billing Codes, Modifiers, and Technical Submission

Procedure Code Basics

Procedure codes and modifiers are used in medical coding to provide additional information about a medical procedure, service, or supply. Although HRSN services are not medical, procedure codes and modifiers are used to tell the story of the encounter with a member.

- **Procedure codes** are five characters (typically a letter and four numbers). For example, for a weekly Fruit & Vegetable Box service the procedure code is **T2025 – Waiver services; not otherwise specified (NOS)**.

- **Modifiers** are two characters appended to the procedure code. They provide additional information about the service without changing the meaning of the code. For example, for HRSN pantry stocking and fruit & vegetable benefits, the modifiers identify the program (e.g., **U1 = HRSN waiver program**) and service delivery mode unit (e.g., **U8 = Weekly Delivery** or **U5 = Direct Member Purchase**).
- Modifier U1 should be listed first on all HRSN claims (except when billing CCO Variable Admin for Housing Services, Home Modifications, or Home Remediations; as noted in the next section).

HRSN Billing Codes and Modifiers

All HRSN service claims will have one procedure code and a minimum of one modifier. In most instances, a service will utilize two modifiers. Most claims will include:

- the procedure code,
- the U1 HRSN program modifier, and
- any additional modifier indicated on the fee schedule for each service rendered.

For almost all HRSN services, the U1 modifier will be used to indicate that a service is specific to the HRSN program and must be the first modifier submitted on encounter claims. Using this modifier will help OHA analyze data specific to HRSN and inform future decisions around this benefit.

Exceptions to U1 as the Primary Modifier

The exceptions to the U1 modifier being first are listed in the table below.

Table 1: Exceptions to U1 as primary modifier

Procedure Code	Primary Modifier	Secondary Modifier
99499 - CCO Variable Admin for Housing Services	U9	U1
S5165 - Home Modifications	UB	U1
S5165 - Home Remediations	U9	U1

Administrative Costs

Administrative Costs for HRSN Service Providers

HRSN service providers should **not** bill the procedure code 99499. The CCO Variable Admin code 99499 is only billable by CCOs. HRSN service providers can bill for their time working on a member's behalf through HRSN O&E and tenancy services. The costs of providing these services should be covered by the fee schedule rates. If HRSN service providers have questions or concerns with these rates, please contact HRSN.Program@oha.oregon.gov.

HRSN service providers can find what they can bill under each service by reviewing the [HRSN Outreach & Engagement and Tenancy Services Comparison](#).

CCO Variable Admin

CCOs must submit a claim to receive the variable admin. Housing Supports CCO Variable Admin is payable associated with claims for each of the following:

- the first month of rent and utility costs paid per member, whether forward or arrears (H0044),
- the first instance of medically necessary home accessibility modifications per member (S5165-UB-U1), and
- the first instance of medically necessary home remediations per member (S5165-U9-U1).

Home changes for health CCO Variable Admin can be claimed once per eligible device, per member, per 36 months **for services delivered on or prior to December 31, 2025**.

If a claim that substantiated a CCO variable administrative claim was ultimately voided, the administrative claim must also be voided by the CCO. Variable administrative fees are only valid for clean claims and must also be voided when the claim that qualifies this payment is voided.

CCOs receive HRSN-related administrative payments through fixed, per member per month (PMPM) payments as part of their monthly capitation rates, as well as variable administrative payments for select HRSN services. Together, the fixed and variable

payments generally compensate CCOs for a reasonable level of administrative costs to support the CCO’s responsibilities.

Modifier 59 – Duplicate Dates of Service

Modifier 59 can only be submitted as a third modifier code in specific circumstances, as detailed in Table 2 below. MMIS will not pay any HRSN claim if modifier 59 is used in any other way.

Whenever possible, CCOs and HRSN service providers should try to avoid using modifier 59 as the third modifier by avoiding duplicate dates of service.

Table 2: When to use modifier 59

Procedure Code	Primary and Secondary Modifiers	When to use 59 as third modifier
99499 – CCO Variable Admin for home changes for health	U1 (primary) NU (secondary)	The HRSN service provider has delivered multiple qualifying devices on the same date to a single member.
H0044 – Rent and Utility Costs (Monthly, forward)	Any modifier combination	If necessary, to indicate multiple claims on the same date of service (DOS) when billing rent and utilities on the same day. Use only as a last resort.

HRSN Technical Submission Tipsheet

Information on Electronic Data Interchange (EDI) loops, segments, and required claim elements:

- Plan ID# - must correspond to the Plan that the member is enrolled in on the date of service (DOS).
- Billing Provider ID# (must be CCO OR HRSN Provider Type)

- If Typical – 2010AA using NPI.
- If Atypical – 2010BB, REF01 with G2 qualifier.
- Rendering Provider ID# (sent only if different than Billing Provider in Loop 2010)
- If Typical – 2310B using NPI (NM108/NM109).
- If Atypical – 2310B using Medicaid ID# (REF01/G2 Qualifier).
- Diagnosis Code – must contain a valid diagnosis code – Loop 2300.
- CCO Paid Amount – Loop 2320 AMT.
- Detail Line including HRSN Procedure Code and Modifier, DOS, HCP and Allowed Amount – Loop 2400.
- Claim Adjustment Segment – Loop 2430 CAS.

Rent and Utility Financial Assistance

Benefit Overview

For additional information on rent and utilities services and eligibility, refer to [OAR 410-120-2005](#).

- To receive HRSN utilities (including forward utilities and set up fees), a member must also be receiving HRSN rent assistance. HRSN utilities cannot be authorized as a standalone service.
- Forward utilities and set up fees may only be received during months that the member is also receiving HRSN rent assistance. Forward utilities cannot exceed forward rent, but forward rent can be authorized without utilities.
 - In other words, forward (recurring) rent and utilities payments should have the same duration, or utilities should have a shorter duration.
 - Scenarios where the forward utilities have a shorter duration than 6 months include: 1) rental arrears were paid, or 2) forward utilities support is not needed.
- Utilities arrears (or past due) may be received for months in which the member was not receiving HRSN rent assistance; however, the member needs to be currently receiving HRSN rent assistance. HRSN utility arrears can be at the

member's current or previous address if payment of those utilities supports the member with maintaining their current housing.

- Utility arrears that have been sent to collections are not eligible for coverage if the documentation for these arrears does not provide confirmation of the duration of past due amount.
- Payment may be for past due rent up to six months or forward rent for up to six months, or some combination of past due and forward rent not to exceed a total of six months.
- Rent and utilities arrears cannot be paid prior to 6 months before housing services launched (services launched 11/1/24 and arrears can be paid back as far as 5/1/24).

Please refer to [Appendix A](#) for example scenarios that demonstrate how to bill for HRSN rent and utilities where there are several months with arrears.

Definitions

- **Forward rent** is rent that is due when the member is receiving rent and utility assistance. Forward rent must always be consecutive months.
- **Rental arrears** (or past due rent) is rent that was due before the member begins receiving rent assistance (see [Appendix A](#)).
- **Utilities arrears** (or past due utilities) are utilities with dates of service before the member began receiving forward rental assistance and cannot be attributed to a month in which the member is receiving forward rent.
- **Forward utilities** are utilities with dates of service in the month(s) that the member is receiving forward rental assistance. Forward utility assistance must not exceed forward rental assistance. For visual examples of forward vs. arrears utilities and potential timelines, see [Appendix A](#).
- **Landlord billed utilities** are utilities that are included on a rent ledger.
 - In the case that the rent payment includes utilities (in other words, utilities are not provided as a separate line item on the lease or rent bill), consider this payment as rent only.

General Guidance

- CCOs may authorize rent and utilities (forward or arrears) up to the UPL to account for the fact that utility bills may vary month to month. The claim sent to OHA should reflect the actual amount paid for the member's rent and or/utility bills.
- Paying rent to keep members housed should be priority. If not all the utility bill information is available yet, rent can be paid if it is 100% or less of the UPL (given the member's region and bedroom size), and once the utility information is available, any additional claims can be submitted up to the monthly 150% UPL.
- In cases where the member has past due utility costs that have been added to the ongoing utility bills, and there is no way to separate the utilities arrears amount or month, these costs may be paid as a monthly payment for ongoing utility costs (forward utilities) and will be subject to the monthly UPL. This practice should be used only as a last resort and may result in a member's full utility bill not being paid due to reaching the monthly UPL. The preferred approach is to divide multi-month bills across different months.
- Any landlord-billed utilities that appear on the rent ledger can be paid with rent in the month that they are charged, provided that the utilities are on the rent ledger and their cost(s), when added to the member's monthly benefit, do not exceed the monthly UPL. See the housing [DOS section](#) for billing details. CCOs and Providers are responsible for making sure that no more than six months of utilities are covered.
- For example, if a member is receiving six months of forward rent and utilities from August through January and the landlord-billed water included with September's rent reflects a service period in June, then it would be allowable to include the water bill in September's rent payment if water is on the rent ledger for September. The payment for water would be considered part of the month of September's rent and utilities benefit. Providers would need to ensure that the member does not receive more than six months of water utility supports (across utilities arrears and forward rent and utilities billing).
 - If the member is receiving utilities arrears from June through August and forward rent and utilities from September through November, the landlord-billed water would still be considered part of September with a September DOS, provided that the member's utilities benefit does not exceed six months.

- Rent and one or more standalone utilities for the same month can be submitted on one claim using the same DOS, provided that:
 - The DOS for the claim is the first of the month.
 - The due date for the utility bill is also the first of the month **OR** the service period for the utility includes the first day of the month (that is being billed as the DOS).
- The **combined** rent and utilities claims for the month cannot exceed the monthly UPL.

Rent and Utility Financial Assistance Rate Updates, Effective 11/1/2025

- All authorizations for the rent and utilities benefit(s) that occur on or after 11/1/25 are subject to the updated rates, effective 11/1/25. Authorizations that occur on or before 10/31/25 will still refer to the fee schedule rates effective 11/1/24 – 10/31/25.
- For rent and utilities-related encounter claims submitted to OHA with dates of service on or after 11/1/25, MMIS will refer to the revised Upper Payment Limits (UPL), reflected in the updated fee schedule, in order to determine if the entire paid amount submitted on the encounter is reimbursable.
- If a member was authorized for the rent and utilities benefit prior to 11/1/25 and the below conditions apply, HRSN providers may need to separate payments into multiple claims:
 - the member resides in Region A, where the rates have decreased marginally,
 - the member will receive the benefit with a DOS on or after 11/1/25, and
 - the member's rent and utilities costs are above the updated UPL (but at or below the 11/1/24 effective rates).

Example

- Member is authorized for HRSN rent and utility financial assistance, three bedrooms, Region A, on 7/1/2025.
- The authorized UPL (given region and bedroom size) for reimbursement is \$4,215 per month (per fee schedule effective 11/1/24).

- For dates of service (DOS) on or after 11/1/2025, MMIS/OHA will only reimburse encounters up to the revised UPL. In this instance, a UPL of \$4,110 for codes H0044-U1-U4; region A.
- The individual encounters with DOS between 7/1/2025 – 10/1/2025 can be billed up to the authorized amount of \$4,215.
- Encounters with DOS on or after 11/1/2025 will only reimburse up to the new UPL of \$4,110. If the member's benefit exceeds \$4,110, it would be required to submit more than one claim. For example, the first claim could reimburse up to \$4,110 and, if needed, a second claim could be submitted to be reimbursed for the remaining \$105. The second claim would need to use a different DOS within the same month, or use the same DOS and bill with modifier code 59, and these two claims could not be more than the monthly UPL of \$4,215 the member was authorized for.

Utilities Arrears and Utilities Set Up

- Utilities Arrears and Utilities Set-Up cover standard utilities, including electricity, gas, water/sewer, and garbage, as well as phone and internet.
- Utilities Arrears does not have additional modifiers beyond the U1 modifier required for all HRSN services. It utilizes the same procedure code as Utilities Set-Up but does not require the bedroom size modifiers in order to differentiate between the two services. Even though a second modifier is not used when billing for Utilities Arrears, the CCO is responsible for ensuring the payment adheres to the upper payment limit for the region and number of bedrooms.

Prepaid Utilities

- Pre-paid utilities, such as phone minutes or bulk orders of fuel (wood cords, propane, etc.), can be reimbursed similarly to billing for utilities not bundled with rent. Documentation must be maintained that reflects the total payment amount, the months that the paid amount represents in expected usage, and how the bill was paid (all at once or split between months). These utilities may be reimbursed by:
 - Billing the pre-paid utility cost, in full, with a DOS that reflects either the purchase date of the utility or the forward rent month that the utility is

attributable to, provided that the combined rent and utilities benefit does not exceed the UPL for that month.

- For example, billing for 180 pre-paid cellular minutes in December; or
- Splitting the utility cost into billable amounts that are attributable to the months that the utility is meant to cover.
 - For example, splitting a \$300 bill for propane between the three months (December, January, February) that the fuel is intended to be used in.
- If the member loses OHP eligibility before the entire amount of the pre-paid utilities have been claimed, claims cannot be submitted for dates of service where the member is no longer eligible, even if the full amount of the pre-paid utilities have yet to be reimbursed.
- If utilities are meant to cover multiple months, but the entire amount was billed during the month in which the bill was provided, additional amounts for this utility type cannot be billed during the same months/service period in which payment was already made unless the amount is within the monthly UPL.
 - For example, if a member receives 360 pre-paid cellular minutes for December, January, and February, additional minutes cannot be added during those months and billed for unless it's under the monthly UPL.
 - In these situations, the provider must ensure that the benefit does not exceed six total months of the benefit.

Dates of Service

Rent (forward and arrears)

- Forward rent: use the first day of the month that the rent is for.
 - If rent is required to be paid prior to the first of the month, it can be paid up to ten (10) days before the month in which rent is due and can be submitted with a date of service (DOS) that reflects the date of the rent payment, so long as it is not more than ten (10) days prior to the first day of the month that the rent is for (e.g., rent is due 2/1; DOS is the date of payment if paid during 1/22 – 1/31).

- If this billing flexibility is leveraged to submit claims for dates of service prior to the first of the month for a given member, it would be advisable and expected that subsequent months' claims would similarly reflect the date of payment for rent; this helps OHA track the distinct months in which each member received the benefit.
- For rent arrears (i.e., rent assistance paid for months in the past): Use the **second** day of the month that the rent is for. For scenarios where the member was not enrolled in OHP during the time the arrears were accrued, please see Table 4.
- This allows OHA to distinguish between rent arrears and forward rent payments.
- Late fees should be paid on the same claim as rent whenever possible. If the late fee is billed to the member **after** rent was paid:
 - Bill an additional H0044 claim to first day of the month in which the late fee was accrued (include modifier 59 so that MMIS knows it's not a duplicate claim), or
 - Bill an additional H0044 claim to the date the late fee was paid if the late payment date occurs within the same month rent was paid and that the fee was accrued, or
 - Bill an additional H0044 claim to any day of the month of the same month rent was paid with the late fee (exception: not the 2nd of the month).
 - **Note:** Late fees must be within the monthly UPL for which they have been accrued.

Utilities (forward and arrears)

- Utility dates of service (DOS) can refer to either:
 - a single date in a date range that the utility service period took place; **or**
- the due date for payment of the utility bill.
- **Important:** the DOS methodology selected should remain consistent across the total rent and utilities benefit for a given member.
- Utilities that are not bundled with rent can be billed using a different DOS than the rent payment. To bill, use a DOS for the utility that is
 - within the utilities service period;

- shares the same month of service as the rent claim that the utility is tied to; and
- is not the first or second of the month (which are reserved to indicate forward rent and rent arrears).
- Forward utilities that are not bundled with rent should be billed using a consistent DOS (e.g., the same day that the utility bill is due each month).
- Multiple forward utilities that are not bundled with rent **and** have overlapping service periods can be combined on a single claim, so long as the DOS on the claim is within the service period of each utility.
 - For example, a member's July rent is paid with a service date of 7/1 and covers 7/1 - 7/31. The member also has two standalone utilities for July: water, which has a service period of 7/13 - 8/12; and phone, which has a service period of 7/5 - 8/4. Both water and phone utilities could be submitted on a single claim with a DOS anywhere between 7/13 - 7/31, which are the days in July (the month of rent these utilities are attributable to) that these utilities' service periods overlap.

Table 3: Situation – Member is receiving HRSN and was enrolled in OHP with their current health plan during the time they accrued eligible HRSN housing costs

Type of assistance	DOS	Example
<p>Forward rent assistance (utilities may or may not be included in rent payment)</p> <p>Procedure Codes: H0044 (monthly) OR H0043 (daily) + U1 modifier + bedroom modifier</p>	<p>Month: Month that the rent is for</p> <p>Day: First day of the month (even if it was paid within the prior ten days).</p>	<p>Rent is for December 2024</p> <p>DOS is 12/1/24 on encounter claim, even if the claim was paid during 11/21 – 11/30.</p>
<p>Forward utility assistance that is not bundled with a rent payment</p> <p>Procedure Codes: H0044 (monthly) OR H0043 (daily) + U1 modifier + bedroom modifier</p>	<p>Month: Should be the same as the month of rent it corresponds to.</p> <p>Day: Any day other than the first or second of the month (which are reserved for forward/arrears rent), or may submit with rent claim (see example).</p>	<p>(Single utility not bundled with rent)</p> <p>Utilities bill is tied to forward rent in January; service period is 12/15/24 – 1/14/25</p> <p>DOS is 1/5/25 on a separate encounter claim from the rent.</p> <p>DOS would be 1/1/25 if paid on the same encounter claim as the rent.</p> <p>(Multiple utilities not bundled with rent, service periods overlap)</p> <p>Utilities Bill #1 is for 12/15/24 – 1/14/25</p> <p>Utilities Bill #2 is for 1/7/25 – 2/6/25</p> <p>Both utilities are tied to forward rent in January.</p> <p>DOS is 1/7/25 on a separate encounter claim from the rent.</p> <p>DOS would be 1/1/25 if paid on the same encounter claim as the rent.</p>

<p>Forward utility assistance that is not bundled with rent payment, and is billed quarterly (or for multiple months)</p> <p>Procedure Codes: H0044 (monthly) + U1 modifier + bedroom modifier</p>	<p>Month: Should be the same as the month of rent it corresponds to.</p> <p>Day: Any day other than the first or second of the month (which are reserved for forward/arrears rent), or may submit with rent claim (see example).</p>	<p>Utilities Bill is for 12/15/24 - 3/14/25 DOS are 12/15/24, 1/15/25, and 2/15/25</p> <p>The billed amounts are to be split into separate claims, one for each month that utilities were billed in the service period. If separate monthly amounts are unknown, calculate by using total cost divided by number of months. If unknown, calculate DOS by estimating the first date of the service period for each month in the quarter. Each DOS should reflect a different month and should be the same day of the month, if possible. Alternatively, multi-month bills can be divided by the number of months that the service period covers, and each month's worth of charges can be submitted on the same encounter claim with rent using the rent DOS.</p>
<p>Rent arrears assistance (utilities are bundled with rent)</p> <p>Procedure Codes: H0044 (monthly) OR H0043 (daily) + U1 modifier + bedroom modifier</p>	<p>Month: Month in which the rent arrears was accrued.</p> <p>Day: Second day of the month.</p>	<p>Rent arrears for October 2024.</p> <p>DOS is 10/02/24 on encounter claim.</p>
<p>Utilities arrears for multiple months that are not bundled with rent payment</p> <p>Procedure Codes: T2035 + U1 modifier</p>	<p>Month: First month within utilities service period.</p> <p>Day: First day within utilities service period.</p>	<p>Utilities Bill is for 8/4/24 – 11/3/24 DOS are 8/4/24, 9/4/24, and 10/4/24</p> <p>Calculate monthly amount using total cost divided by number of months. Calculate DOS by estimating the first date of the service period for each month in the quarter. Each DOS should reflect a different month.</p>

Table 4: Situation – Member is receiving HRSN and was not enrolled in OHP with their current health plan during the time they accrued eligible HRSN housing costs

Type of assistance	DOS	Example
<p>Rent arrears assistance (utilities are included in rent payment)</p> <p>Procedure Codes: H0044 (monthly) OR H0043 (daily) + U1 modifier + bedroom modifier</p>	<p>Month: Month that the member receives service.</p> <p>Day: Closest day after the first day of the month, and OHP enrollment effective date. If multiple arrears months, order DOS from most recent month to least recent month.</p> <p>Note: Billing DOS prior to the Member's OHP enrollment will result in denied claims.</p>	<p>Member has rent arrears for September, October, and November 2024; Member enrolled in OHP/health plan 11/11/24.</p> <p>DOS for rent accrued in November: 11/11/24</p> <p>DOS for rent accrued in October: 11/12/24</p> <p>DOS for rent accrued in September: 11/13/24</p>
<p>Utilities arrears assistance that is not bundled with rent payment</p> <p>Procedure Codes: T2035 + U1 modifier</p>	<p>Month: Month that the member receives service.</p> <p>Day: First day OHP enrollment effective date and closest day that falls after the first day of the utilities billing period. If multiple utilities months, order from most recent month to least recent month.</p> <p>Note: Billing DOS prior to the Member's OHP enrollment will result in denied claims.</p>	<p>Member is eligible for HRSN in November 2024 and needs utilities arrears for September and October 2024.</p> <p>DOS for utilities accrued in Oct: 11/1/24</p> <p>DOS for utilities accrued in Sept: 11/2/24</p>

Rent and Utility Financial Assistance: Multi-Month Bill

For a multi-month bill, select a date of service (DOS) for each month by:

- Dividing the total amount of the bill by the number of months that the bill covers
- Use the first DOS period, and the same date for each subsequent month

Example

- Aaliyah is renting a one-bedroom apartment in Clackamas County with the water and trash billed quarterly (Region A). Aaliyah is eligible to receive HRSN rent and utility financial assistance for up to six months.
- The UPL is \$2,625 per month ($\$1,750 \times 150\%$)
- Aaliyah's rent is \$1,780 each month; water and trash utilities expenses are \$300 each quarter (2/20 – 5/19 and 5/20 – 8/19).
- Aaliyah needs support for six months; monthly costs range from \$1,780 to \$2,080, depending on when water and trash payments are due.
- To bill, utilize bill code H0044 and modifiers U1 (HRSN waiver program) and U2 (0-1 bedroom). When the quarterly utility bill arrives, submit a claim for each month's utility service (three total claims). Multi-month bills should be divided into separate claims.
- For multi-month bills, to determine the amount to include in each month's claim, calculate the average amount due across the number of months included in the bill. For this example, $\$300 \text{ total bill} / 3 \text{ months} = \100 per claim .
- Submit the claim using the DOS per the guidelines in the table below.

For a multi-month bill, select a DOS for each month according to the DOS guidelines in the table below. Use the first date of billing service period if possible. For example, 2/20, 3/20, and 4/20 for a bill covering 2/20 – 5/19.

Table 5. DOS Example: Rent And Utility Financial Assistance

Month	Claim Amount	Service Period	DOS	Codes
1 (February rent)	\$1,780	2/1 - 2/28	2/1	H0044, U1 and U2
1 (February utilities)	\$100 (\$300/3)	2/20 - 3/19	2/20	H0044, U1 and U2
2 (March rent)	\$1,780	3/1 - 3/31	3/1	H0044, U1 and U2
2 (March utilities)	\$100 (\$300/3)	3/20 - 4/19	3/20	H0044, U1 and U2
3 (April rent)	\$1,780	4/1 - 4/30	4/1	H0044, U1 and U2
3 (April utilities)	\$100 (\$300/3)	4/20 - 5/19	4/20	H0044, U1 and U2
4 (May rent)	\$1,780	5/1 - 5/31	5/1	H0044, U1 and U2
4 (May utilities)	\$100 (\$300/3)	5/20 - 6/19	5/20	H0044, U1 and U2
5 (June rent)	\$1,780	6/1 - 6/31	6/1	H0044, U1 and U2
5 (June utilities)	\$100 (\$300/3)	6/20 - 7/19	6/20	H0044, U1 and U2
6 (July rent)	\$1,780	7/1 - 7/31	7/1	H0044, U1 and U2
6 (July utilities)	\$100 (\$300/3)	7/20 - 8/19	7/20	H0044, U1 and U2

Rent And Utility Financial Assistance: Separate Utility Bills

Utilities that are separate from rent (not paid by the landlord or on the rent ledger) can be included in one claim or separated into multiple claims. The combined claims for a month must not exceed the UPL for the month.

Example

- Jorge is renting a **two-bedroom** apartment in Marion County (Region C), but utilities are not included in rent and are paid separately. Jorge has been authorized for rent and utility financial assistance beginning 3/1/25.
- The upper payment limit (UPL) is \$2,317.50 per month (\$1,545 x 150%).
- Jorge's rent is \$1,500 and due on the first of each month.
- Jorge's electric bill is due on 3/20, covers the service period from 2/15 – 3/14, and is \$175.
- Jorge's water bill is due on 3/15 and covers the service period from 2/10 – 3/9 and is \$100.
- To bill, utilize bill code H0044 and modifiers U1 and U2.

- The monthly claim will be one claim of \$1,775, or three claims of \$1,500, \$175, and \$100; either way, the rent and utility amounts will not exceed the UPL and will be paid in full.
 - Option 1: If submitting all bills as one claim of \$1,775, use a service date that is the first of the month to indicate the payment includes rent (with or without utilities). 3/1 would be the appropriate DOS for this example.
 - Option 2: If submitting as three separate claims, use any date in the service period (as long as it's not the first or second) as the DOS for utilities, and the first day of the month for rent. For example:

Table 6: DOS examples for separate utility bills

Bill Type	Claim Amount	Service Period	DOS	Code
Rent	\$1,500	3/1 - 3/31/25	3/1/25	H0044, U1 & U3
Electric	\$175	2/15 - 3/14/25	Any date from 3/3 - 3/14	H0044, U1 & U3
Water	\$100	2/10 - 3/9/25	Any date from 3/3 - 3/9	H0044, U1 & U3

Rent And Utility Financial Assistance: Arrears

Members may receive support for rent and utilities arrears. While the HRSN rent and utility financial assistance benefit began on 11/1/24, rent and utility arrears can be processed for up to six months before that date (no earlier than 5/1/24) subject to the member's eligibility and the 6 months' rent and utilities maximum.

Example

- Katrina is renting a three-bedroom apartment in Gilliam County (Region D) and owes her landlord three months' rent in arrears for June, July, and August.
- The upper payment limit (UPL) is \$2,647.50 per month (\$1,765 x 150%).
- Katrina's rent is \$1,600 each month, which includes utilities.
- Katrina has qualified to receive three months' of HRSN rental arrears and will also need the next three months of rent payments covered through HRSN forward rental assistance. Katrina's CCO will begin paying forward rent starting 9/14.
- To bill, utilize bill code H0044 and modifiers U1 and U4 and submit separate claims for each month of rent.

- For the arrears, the August rent will be entered with DOS as 8/2, July rent with DOS 7/2, and June rent with DOS as 6/2. (Use of the second day of the month as the DOS was intentional to help OHA track rental arrears).
- For (forward) September rent, enter total amount for month of claim with DOS as 9/1.
- The monthly claim will be one claim of \$1,600; the Rent and Utility does not exceed the UPL and will be paid in full.
- Katrina may receive rent for October and November. Katrina may not receive HRSN rent payments for December as she will have met the six-month limit for this service.

Rent And Utility Financial Assistance: Multi-Household Dwellings

Multiple households (as defined by [OAR 410-200-0015](#)) may be residing in the same space, such as two households in a house and an ADU on the same property, an RV on another household's land. Or in cases of being "doubled-up" where two or more households are living in the same physical space (such as an apartment) due to financial constraints or economic hardship. In the scenario of a "doubled-up" household, a singular rent payment is often shared between the households. In this type of situation, it is important to know how much of the space is occupied by the HRSN-Authorized individual's household.

Example

- Josie is renting a four-bedroom house in Malheur County (Region E) where the rent is \$1,400 a month, with no additional responsibility for utilities as part of their rent.
- The upper payment limit (UPL) is \$2,175.00 per month ($\$1,450 \times 150\%$).
- Josie's household lives in three of the bedrooms in the house, with a roommate living in the fourth bedroom.
- To calculate the amount of rent Josie's household is responsible for under HRSN, divide the overall rent costs by the total number of bedrooms in the shared unit. Then multiply that by the number of bedrooms the authorized household is occupying.
 - For example, $\$1,400/4 = \350 . $\$350 \times 3 = 1,050$.
- To bill, utilize bill code H0044 and modifiers U1 and U4.
 - Josie's household's rent is \$1,050. They still have an allowance of \$1,125 for utilities not bundled in the rent before they reach the UPL.

Rent And Utility Financial Assistance: Other Funding Support

Members receiving HRSN rental assistance may receive support for a portion of rent through other programs. HRSN Housing Services may be braided or sequenced with funding from other local, state, and federal programs. However, a member may not receive duplicative services (i.e., receive the same service at the same time), nor may they receive HRSN rent and utility financial assistance if someone else in their

household has already received it (see [OAR 410-120-2005](#) for additional details). If a member is receiving a similar service with differences in amount or duration, then they can receive HRSN Services, subject to the non-HRSN program's requirements. Before authorizing HRSN rent and utility financial assistance for a member who is already receiving some assistance through another program, the CCO and HRSN service providers should confirm it is allowable for the member to receive additional support through HRSN to supplement any deficiencies in existing program support.

Note on HUD Rental Assistance: A member who is receiving assistance through any HUD funded program (including Housing Choice Vouchers, similar HUD vouchers, or any form of HUD Project-Based support) may receive HRSN rent and utility financial assistance only for the portion of the member's rent and utilities that are in arrears at the time of authorization. A member who is receiving support through any HUD funded program may not receive any future rent or utility support through HRSN housing. See [Appendix B](#).

Examples

Example 1: HRSN rent and utility financial assistance after eviction prevention funding from another program

- Kai is renting a three-bedroom apartment in Deschutes County (Region B), where utilities are included with rent. Kai receives an eviction notice.
- The UPL is \$3,960.00 per month (\$2,640 x 150%).
- The county provides eviction prevention support to Kai while they apply for HRSN rent assistance.
- Kai's rent is \$2,500 each month; eviction support from the county covered the past due rent and utilities arrears; however, Kai still needs assistance with their ongoing rent and utilities. HRSN may then pay Kai's rent for up to six months, as needed.
- Their CCO determines they are eligible for HRSN rent and utility financial assistance. The CCO authorizes and will pay Kai's forward rent and utilities for up to six months. The support Kai received from the county does not count toward the six months of HRSN rent and utility financial assistance.

- To bill, utilize bill code H0044 and modifiers U1 (HRSN waiver program) and U4 (3+ bedroom).

Example 2: HRSN rent and utility financial assistance to supplement gaps in existing program support

- Jacob is renting a studio apartment in Benton County (Region B) where the rent is \$1,200 a month, with no additional responsibility for utilities.
- The UPL is \$2,152.505 per month (\$1,435 x 150%).
- Jacob recently completed a court mandated residential Substance Use Disorder treatment program, and his move-in costs were supported through a Measure 110 grant.
- The M110 grant will provide a total of three months of gradually reduced rent assistance consisting of 100% assistance the first month, 80% the second month, and 60% the third.
- As a probation requirement Jacob must continue to participate in intensive outpatient treatment for the next six months, limiting his availability to become stably employed during that time.
- Jacob is aware that he does not have support to maintain his housing without additional assistance beginning in month two of his M110 funding.
- Jacob's CCO determines he is eligible for HRSN rent and utility financial assistance for up to six months.
- Jacob's M110 rental assistance impacts the level of rent assistance he is eligible to receive through HRSN. He is not eligible for HRSN rent assistance during the month he is receiving 100% assistance through the M110 grant.
- To fill in the gaps in Jacob's M110 assistance the CCO authorizes and will pay 20% (\$240) of Jacob's rent during the first month of his HRSN eligibility, 40% (\$480) of his rent during his second month of HRSN eligibility, and 100% (\$1,200) of his rent during each of months three, four, five, and six.
- To bill, utilize bill code H0044 and modifiers U1 (HRSN waiver program) and U2 (0–1 bedroom)

Other Housing Services

Home Changes for Health During Extreme Weather

- MMIS will only accept one encounter for variable admin per member, per date of service (DOS).
- If a CCO has delivered multiple qualifying devices on the same DOS to a single member there are two options:
 - Use the same DOS (as the qualifying devices) for the first encounter of variable admin; for each subsequent encounter for variable admin, add an additional day and report that as the DOS.
 - Use the same DOS (as the qualifying devices) for the first encounter of variable admin, and modifier 59 in the third position for subsequent encounters for variable admin for each additional device.
- For device installation, installation time can be
- Up to 2 hours of drive/installation time for all installations within 35 miles of the nearest available vendor/contractor.
 - Up to 3 hours of drive/installation time for all installations greater than 35 miles from the nearest available vendor/contractor.

Dates of Service

Table 7: Dates of service for home changes for health

To bill the following:	Use this as the DOS:
Devices (air conditioners, air filtration devices, heaters, portable power supplies, mini refrigerators)	<ul style="list-style-type: none"> • Use the date that the device was delivered to the member (i.e., the date that the member confirmed having received the device, if this information is reasonably accessible), OR • the date the device was ordered, OR • the estimated delivery date.
Device installation	Use the date of installation.
CCO variable administrative payments that are payable for qualifying devices	Use the date that the device was delivered to the member.

Storage Fees

- Storage fee payments may be for up to six months, covering past due fees, future fees, or a combination, with the total not exceeding six months.
- A member must be receiving HRSN rent and utility financial assistance to also receive the storage fees service during a given month.

Outreach & Engagement and Tenancy Services

General Guidance

- Outreach and engagement (T1017) and tenancy services (H2015) have a limit of 6 (six) hours billable time per member, per day. Outreach and engagement (O&E) also has a limit of 30 hours per member, per year (where a year begins on the first date of service (DOS) that a member received O&E services). There is also a limit of 3 (three) hours for travel time for each of these services per member, per day. All travel time is included in the overall daily cap.
- A member can be served by more than one staff person within a single day, and all time spent will count towards a single claim. For example, if staff member “A” spends three minutes calling the member, leaving a voicemail, and documenting the outreach attempt; then later in the day, the member calls back and speaks to staff member “B” for five minutes. These eight minutes, combined, would meet the minimum for one unit of billable time, since it’s the same organization serving the member.
- The rate(s) for O&E and tenancy services increased from \$20/15min to \$26/15min on 11/1/25. The rate submitted on claims for these services should reflect the rate that was effective on the DOS that the interaction with the member took place.
- HRSN O&E should not be billed if the staff member’s time is being paid through the Community Capacity Building Fund (CCBF) grant.

7-Day Bundling Option

Starting 11/1/25, billable time for either O&E or tenancy services can be added across multiple dates of service to create a billable unit(s) if the following criteria are met:

- A service provider spends less than 8 minutes providing billable services to a single member on one or more days in a single calendar week; AND
- The billable time occurs within a single calendar week (spanning Sunday to Saturday), not to exceed seven days; AND
- Combining billable time across multiple dates of service is strictly necessary, meaning a provider would not be compensated for their time but for this flexibility; AND
- The combined billable time totals at least 8 minutes (within seven days spanning Sunday to Saturday) for a single member.

If the 8-minute threshold is met on a single DOS, then a claim should be submitted for that day only and not incorporated into a bundled date range. However, dates where the 8-minute threshold are met can be incorporated into a bundled date range if it is strictly necessary to ensure that billable time on other days in a given calendar week (including dates of service where the 8-minute threshold was not met) can be counted on a billed claim.

This bundling is optional and should only be leveraged if a provider is bundling time across multiple dates of service that would not be billable on their own individual dates of service. A list of activities that can be billed under O&E and tenancy services can be found in the tables of [OAR 410-120-2005](#).

Date of Service

- Use the DOS the organization actively interacted with the member.
- Do not submit a range of dates within a single claim unless billable time is combined across multiple dates of service in order to create a billable unit.
- When bundling time spent providing either O&E or tenancy services across multiple dates of service, claims submitted to OHA should reflect the entire date range in which services occurred.

Examples

The following table has examples of scenarios where the HRSN service provider could use the 7-day bundling option:

Table 8: Examples of 7-day bundling for O&E or tenancy services

Example	Billing Guidance
<p>HRSN service provider conducts 4 minutes of O&E with member “A” on Tuesday, 11/4/25.</p> <p>The same provider engages in 7 minutes of O&E with member “A” on Thursday, 11/6/25.</p>	<p>Submit one claim for O&E [Billing codes T1017-U1-UD], since the total interaction (11 minutes) meets the minimum threshold to bill the per-15-minute unit.</p> <p>First/from DOS = 11/4/25 Last/to DOS = 11/6/25</p>
<p>HRSN service provider conducts 4 minutes of tenancy services with member “B” on Monday, 11/3/25.</p> <p>The same provider engages in 32 minutes of tenancy services with member “B” on Wednesday, 11/5/25.</p> <p>The same provider engages in 7 minutes of tenancy services with member “B” on Friday, 11/7/25.</p>	<p>Submit one claim for tenancy services [Billing codes H2015-U1-UA]. Time spent providing services to member B in calendar week 11/2-11/8 totals 43 minutes. Thus, the claim will reflect three (3), per-15-minute units.</p> <p>First/from DOS = 11/3/25 Last/to DOS = 11/7/25</p>
<p>HRSN service provider conducts 49 minutes of O&E with member “C” on Tuesday, 11/4/25.</p> <p>The same provider engages in 37 minutes of O&E with member “C” on Wednesday, 11/5/25.</p> <p>The same provider engages in 5 minutes of O&E with member “C” on Friday, 11/7/25.</p>	<p>Submit two claims for O&E [Billing codes T1017-U1-UD].</p> <p>First claim: Tuesday, single DOS Three (3) units of O&E (49 minutes total)</p> <p>First/from DOS: 11/4/25 Last/to DOS: 11/4/25</p> <p>Second claim: Spans Wednesday—Friday. Three (3) units of O&E (37+5 minutes = 42 minutes total, meets the 38-minute threshold to bill 3 units)</p>

	<p>First/from DOS = 11/5/25</p> <p>Last/to DOS = 11/7/25</p>
<p>HRSN service provider conducts 4 minutes of O&E with member “D” on Tuesday, 11/4/25.</p> <p>The same provider engages in 34 minutes of O&E with member “D” on Wednesday, 11/5/25.</p> <p>The same provider engages in 10 minutes of O&E with member “D” on Friday, 11/7/25.</p>	<p>Submit two claims for O&E [Billing codes T1017-U1-UD].</p> <p>First claim: Spans Tuesday—Wednesday. Three (3) units of O&E (4+34 minutes = 38 minutes, which is the threshold for billing 3 units)</p> <p>First/from DOS = 11/4/25</p> <p>Last/to DOS = 11/5/25</p> <p>Second claim: Friday, single DOS</p> <p>One (1) unit of O&E (10 minutes)</p> <p>First/from DOS = 11/7/25</p> <p>Last/to DOS = 11/7/25</p>

The following table has examples of scenarios where the HRSN service provider should **not** bundle time across 7 days:

Table 9: Examples where O&E and tenancy services should not be bundled

Example	Billing Guidance
<p>HRSN service provider conducts 50 minutes of O&E with member “E” on Tuesday, 11/4/25.</p> <p>The same provider engages in 33 minutes of O&E with member “E” on Wednesday, 11/5/25.</p>	<p>Submit two claims for O&E [Billing codes T1017-U1-UD], one for each date that service occurs.</p> <p>Billable time on each DOS meets the minimum threshold for a billable unit, so these dates of service should not be billed as a date range.</p>

	<p>Even though bundling the time would result in greater reimbursement to the provider, it is not permitted in this instance.</p>
<p>HRSN service provider conducts 10 minutes of tenancy services with member “F” on Tuesday, 11/4/25.</p> <p>The same provider engages in 9 minutes of tenancy services with member “F” on Wednesday, 11/5/25.</p>	<p>Submit two claims for tenancy services [Billing codes H2015-U1-UA], one for each date that service occurs.</p> <p>Billable time on each DOS meets the minimum threshold for a billable unit, so these dates of service should not be billed as a date range. Moreover, it would be disadvantageous to providers to bundle time in this instance, as the bundled time would only represent one (1) billable unit.</p>
<p>HRSN service provider conducts 6 minutes of O&E with member “G” on Monday, 11/10/25.</p> <p>The same provider conducts 4 minutes of tenancy services with member “G” on Friday, 11/14/25.</p>	<p>Unfortunately, billable time cannot be combined across these two services.</p>

Pantry Stocking and Fruit & Vegetable

Benefit Overview

- **Medicaid Provider Requirements:** Providers need to enroll with Medicaid as HRSN service providers and meet the provider qualifications described in [OAR 410-120-2030](#) in order to provide and bill for HRSN services; this includes traditional Medicaid providers who may be billing for other non-HRSN services.
- **Eligibility and Service Descriptions:** For more information on Nutrition-Related Supports, including eligibility and service descriptions, refer to [OAR 410-120-2005](#) Tables 6 and 9.

General Pantry Stocking and Fruit & Vegetable Guidance

Service and Payment authorization

- Each member who requests pantry stocking and fruit & vegetable benefits must be screened and authorized individually. Multiple eligible household members may apply at the same time or apply at different times over the course of the demonstration.
 - Although services must be authorized and billed individually, if multiple authorized individuals reside at the same residence and wish to consolidate service delivery (receive one box or one card monthly) HRSN service providers may combine benefits for households if operationally feasible and with the members' consent; however, there is no requirement to do so. Benefits combined for the purpose of service delivery simplicity must still be tracked for each individual and be billed on separate claims under each individual member's Medicaid ID Number.
- CCOs should authorize pantry stocking and fruit & vegetable benefits up to the weekly Upper Payment Limit (UPL) for a maximum of 24 weeks.
 - Pantry stocking and fruit & vegetable benefit service provision weeks may be temporarily paused (i.e., for up to two weeks) and resumed; however, all service delivery dates must be within the maximum consecutive 6-month timeframe. For example, if the member pauses a week of pantry stocking box delivery due to hospitalization or evacuation due to natural disaster, the

member may resume services without losing any weeks of service, as long as the need to pause services has been communicated to and agreed upon by the provider, and the new service delivery dates fall within the 6-month consecutive timeframe.

- Members may not receive more than 24 units of the box or card benefit.
- Payment authorization is valid for the time period specified on the authorization notice, but not to exceed twelve (12) months, unless the member's benefit package no longer covers the service, in which case the authorization will terminate on the date coverage ends. If 12 months have passed and the member has not yet received services, the authorization is no longer valid, and the member must reapply if they wish to receive services. See [OAR 410-120-1320](#): Authorization for Payment for more information.

Service Delivery and Billing

- Pantry stocking and fruit & vegetable benefits may be delivered and billed weekly, bi-weekly, or monthly, depending on the model.
 - **Box Model:** Pantry stocking and fruit & vegetable box model benefits may be delivered and billed weekly, bi-weekly, or monthly.
 - **Card Model:** Pantry stocking and fruit & vegetable card model benefits may be delivered and billed bi-weekly or monthly. Weekly service delivery and billing is not permitted under the card model to allow for the member to have at least two weeks to spend the card funds.
- Regardless of the model and frequency of billing, the claims need to include weekly unit amounts (one unit per week).

Program Cost and Delivery

HRSN pantry stocking and fruit & vegetable service providers may utilize a portion of the service rate listed on the Nutrition Supports Fee Schedule to cover costs associated with providing the benefit to members. Table 10 below defines the allowable portion providers may utilize for each weekly unit of service.

- **Box Model Program Costs:** For providers of the box model, this portion can cover costs for packaging, shipping, handling, billing, and customer service needs.

- **Box Model Food Costs:**
 - OHA expects each weekly box per member to include approximately:
 - \$61.75 worth of food for pantry stocking.
 - \$23.55 worth of food for fruit & vegetable.
 - Box providers may choose to include more food than the amount allotted for food costs, but must ensure that they don't provide more than 80% of the recommended daily allowance and must not bill more than the benefit's weekly upper payment limit detailed in Table 10 below. If necessary, this can be achieved by the provider billing less than the amount reserved for program cost and delivery.
- **Card Model Program Costs:** For providers of the card model, this portion can cover costs for customer service, printing, packaging and handling, mailing, billing, activation costs, and supporting lost and stolen cards.
- **Card Model Food Costs:** For providers of the card model, the food costs amount listed in the table below must be loaded onto the card.

Table 10: Allowable cost breakdown for benefits

	Fruit & Vegetable		Pantry Stocking	
	Box	Card	Box	Card
Total per week (weekly benefit upper payment limit)	\$53.55	\$31.85	\$99.75	\$70.00
Food	\$23.55	\$23.00	\$61.75	\$61.00
Program costs and delivery	\$30.00	\$8.85	\$38.00	\$9.00

Box Model

- HRSN service providers are expected to maintain records of the approximate value of food that's being provided in each box. This information is not submitted with claims but may be requested by OHA in the case of an audit. CCOs may provide a template for providers to document value of the food, including the invoice or other reporting process.

- For detailed examples of quantities and varieties of foods to include in boxes that may be within the allotted food cost portion, please refer to the separate document *HRSN Box Guidance for Pantry Stocking and Fruit & Vegetable Benefits Boxes*.
- If a member does not receive their box, the service is not considered delivered and may not be billed. OHA does not require proof of delivery to be submitted. HRSN service providers can bill for services if they have documentation that the box was delivered. CCOs should ensure that providers document successful pick-up or delivery prior to billing. CCOs may require proof of delivery at their own discretion, provided the policy applies to all providers and members.
- Medicaid cannot pay for replacement boxes where the initial service was delivered, but the member did not receive the box for various reasons, such as lost or stolen boxes.
 - HRSN service providers have the discretion to pay for replacement boxes but cannot bill Medicaid for replacement services.
 - If a box is stolen or goes missing, the provider should work with the member to arrange for alternative pick-up or delivery options. This coordination with the member is considered part of the customer service definition for program costs and delivery.
- For box model providers who are coordinating local pick-up, HRSN service providers cannot bill if the member did not pick up the box.
 - OHA does not set a time limit for box pick-up; however, CCOs are encouraged to establish and communicate a reasonable pick-up window as well as a standard process for handling missed pick-ups with providers.
- HRSN service providers have discretion in handling replacements for damaged or returned food items per their policy. However, they would not be able to bill Medicaid for any additional costs.
- If the HRSN pantry stocking or fruit & vegetable service provider is also enrolled as an HRSN outreach & engagement (O&E) service provider, and has provided services to the member that align with the HRSN O&E Services (refer to [OAR 410-120-2005](#) Table 7), the provider may be able to bill for appropriate activities through that route.

- HRSN O&E should only be billed when the provider’s activities align with HRSN O&E activities and are not duplicative of any other services, including nutrition program costs and delivery. Refer to Table 11 below for examples of activities included in program costs and what may possibly be billed as O&E.
- HRSN O&E should not be billed if the staff member’s time is being paid through the Community Capacity Building Fund (CCBF) grant.
- Please see the [HRSN Billing Guide Outreach and Engagement and Tenancy Services Section](#) for more detailed HRSN O&E billing information.

Table 11: Examples of Program and Delivery Costs and O&E Activities for the Box Model

Examples of Program and Delivery Costs and O&E Activities for the Box Model		
Base Activities Included in Program Costs and Delivery	Included in Program Costs and Delivery Portion of Service Rate	Possible Supplemental O&E Activities
<ul style="list-style-type: none"> • Packaging • Shipping • Handling • Billing (invoicing & reconciling payments) 	<ul style="list-style-type: none"> • Accepting referrals and contacting members • Working with vendors • Sourcing food & supplies for boxes • Storing food • Preparing boxes • Delivering boxes • Developing and printing recipe cards • Spoiled food management • Staffing a box pick-up site • Calling a member who missed the box pick-up and arranging for alternative way to get the box • Confirming delivery/pick-up options with members and helping them understand the best option for them • Sending pick-up/delivery reminders and courtesy calls if provider sees that the member hasn’t been coming for pick-ups 	<ul style="list-style-type: none"> • Helping a member apply for additional HRSN benefits by completing the request form. • Helping members connect with other resources to meet social needs. <p><i>Note: Per OAR 410-120-2005 Table 7, activities a-c must have been provided on initial service.</i></p>

Examples

Table 12: Example scenarios for providing and billing Pantry Stocking and Fruit & Vegetable Boxes

Example Scenario	Guidance for Provider	Encounter Claims
<p>Example 1 Member is approved for 24 weeks of HRSN pantry stocking box services on 6/24/26 and referred to a provider to begin services.</p> <p>The provider starts providing services on 7/8/26. For the month of July, the provider delivers one box per week on:</p> <ul style="list-style-type: none"> • 7/8/26 • 7/15/26 • 7/22/26 • 7/29/26 <p>Although delivering boxes weekly, the provider prefers to bill monthly.</p>	<ul style="list-style-type: none"> • For monthly billing, wait to bill after the member receives the final box. • After 7/29/26, submit one claim with a unit for each week that a box was delivered (4 units total). • Use the first date the box was delivered (7/8/26) as the date of service (DOS) for the encounter claim. • On the claim, use procedure code S5170 and modifiers U1 (HRSN Waiver Program) and U8 (Weekly Delivery). • Bill four units (the weekly unit rate of \$99.75, which includes food, program, and delivery costs) for a total of \$399. • Continue to bill for up to 24 weeks/24 units, checking eligibility at least each month before billing to confirm the member is still Medicaid eligible. 	<p>Claim 1 (month 1): Procedure Code and Modifiers: S5170-U1-U8 DOS: 7/8/26 - 7/8/26 Amount Billed: 4 units, \$399.00</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: S5170-U1-U8 DOS: 8/5/26 - 8/5/26 Amount Billed: 4 units, \$399.00</p> <p>Claim 3 (month 3): Procedure Code and Modifiers: S5170-U1-U8 DOS: 9/2/26 - 9/2/26 Amount Billed: 4 units, \$399.00</p> <p>Claim 4 (month 4): Procedure Code and Modifiers: S5170-U1-U8 DOS: 10/7/26 - 10/7/26 Amount Billed: 4 units, \$399.00</p> <p>Claim 5 (month 5): Procedure Code and Modifiers: S5170-U1-U8 DOS: 11/4/26 - 11/4/26 Amount Billed: 4 units, \$399.00</p>

		<p>Claim 6 (month 6): Procedure Code and Modifiers: S5170-U1-U8 DOS: 12/2/26 - 12/2/26 Amount Billed: 4 units, \$399.00</p> <p>Total billed: \$2,394 Total units: 24</p>
<p>Example 2 Member is approved for 24 weeks of HRSN fruit & vegetable box services on 6/15/26 and referred to a provider to begin services.</p> <p>The provider starts providing services on July 8th and delivers boxes weekly on:</p> <ul style="list-style-type: none"> • 7/08/26 • 7/15/26 • 7/22/26 • 7/29/26 <p>However, for the last week of July, the member did not pick up their box, even though the provider made multiple reasonable attempts to contact the member.</p> <p>The member picked up all boxes for the remainder of the benefit.</p>	<ul style="list-style-type: none"> • For monthly billing, wait to bill after the attempt is made to deliver the box to the member during the week of 7/29/26. • The provider cannot bill for the last week of July because the member did not receive the box. • After 7/29/26, submit one claim representing the three weekly units delivered for the month. • Use the first date the boxes were delivered (7/8/26) as the DOS for the encounter claim. • On the claim, use procedure code T2025 and modifiers U1 (HRSN Waiver Program) and U8 (Weekly Delivery). • Bill three units (the weekly unit rate of \$53.55, which includes food, program, and delivery costs) for a total amount of \$160.65. 	<p>Claim 1 (month 1): Procedure Code and Modifiers: T2025-U1-U8 DOS: 7/08/26 - 7/8/26 Amount Billed: 3 units, \$160.65</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: T2025-U1-U8 DOS: 8/5/26 - 8/5/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 3 (month 3): Procedure Code and Modifiers: T2025-U1-U8 DOS: 9/2/26 - 9/2/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 4 (month 4): Procedure Code and Modifiers: T2025-U1-U8 DOS: 10/7/26 - 10/7/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 5 (month 5): Procedure Code and Modifiers: T2025-U1-U8 DOS: 11/4/26 - 11/4/26</p>

<p>Although delivering boxes weekly, the provider prefers to bill monthly.</p>	<ul style="list-style-type: none"> • Continue to bill for up to 24 weeks, checking eligibility each month before billing to confirm the member is still Medicaid eligible. • At the end of the benefit, there should be a total of 6 claims that have been submitted, but they will not all reflect 4 units since a week was skipped the first month. 	<p>Amount Billed: 4 units, \$214.20</p> <p>Claim 6 (month 6): Procedure Code and Modifiers: T2025-U1-U8 DOS: 12/2/26 - 12/2/26 Amount Billed: 4 units, \$214.20</p> <p>Total billed: \$1,231.65 Total units: 23 (Member missed one pickup)</p>
<p>Example 3 Member is approved for 24 weeks of HRSN fruit & vegetable box services on June 15th and referred to a provider to begin services.</p> <p>The provider starts providing services on July 8th and delivers boxes weekly on:</p> <ul style="list-style-type: none"> • 7/08/26 • 7/15/26 • 7/22/26 • 7/29/26 <p>However, in the last week of July, there was a natural disaster (e.g., wildfire causing evacuation) that prevented box delivery. The member</p>	<ul style="list-style-type: none"> • For monthly billing, wait to bill after the attempt is made to deliver the box to the member during the week of 7/29/26. • The provider cannot bill for the last week of July because the member did not receive the box. • After 7/29/26, submit one claim representing the three weekly units delivered for the month. • Use the first date the boxes were delivered (7/8/26) as the DOS for the encounter claim. • On the claim, use procedure code T2025 and modifiers U1 (HRSN Waiver Program) and U8 (Weekly Delivery). 	<p>Claim 1 (month 1): Procedure Code and Modifiers: T2025-U1-U8 DOS: 7/08/26 - 7/8/26 Amount Billed: 3 units, \$160.65</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: T2025-U1-U8 DOS: 8/5/26 - 8/5/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 3 (month 3): Procedure Code and Modifiers: T2025-U1-U8 DOS: 9/2/26 - 9/2/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 4 (month 4): Procedure Code and Modifiers: T2025-U1-U8 DOS: 10/7/26 - 10/7/26 Amount Billed: 4 units, \$214.20</p>

<p>contacted the provider and asked to pause the benefit for a week and chose to add that box receive that service at the end of the benefit (which was still within the maximum consecutive 6-month timeframe).</p> <p>The member picked up all boxes for the remainder of the benefit.</p> <p>Although delivering boxes weekly, the provider prefers to bill monthly.</p>	<ul style="list-style-type: none"> • Bill three units (the weekly unit rate of \$53.55, which includes food, program, and delivery costs) for a total amount of \$160.65. • For the next 4 claims, bill four units (the weekly unit rate of \$53.55, which includes food, program, and delivery costs) for a total amount of \$214.20. • For the last claim, the provider may bill 5 units to account for the rescheduled box. • Continue to bill checking eligibility each month before billing to confirm the member is still Medicaid eligible. 	<p>Claim 5 (month 5): Procedure Code and Modifiers: T2025-U1-U8 DOS: 11/4/26 - 11/4/26 Amount Billed: 4 units, \$214.20</p> <p>Claim 6 (month 6): Procedure Code and Modifiers: T2025-U1-U8 DOS: 12/2/26 - 12/2/26 Amount Billed: 5 units, \$267.75</p> <p>Total billed: \$1,285.20 Total units: 24 (Member paused for one week, then resumed and appended one box to the end, on 12/30/26)</p>
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Card Model

- The pantry stocking or fruit & vegetable card benefit should be considered “delivered” once the provider has notified the member of available funds, issued a card to the member, or loaded funds that are accessible for the member’s use.
 - Once funds are available to the member, the member must have a minimum of two weeks (14 calendar days) to spend funds on their card before they expire and additional funds are loaded.
- The HRSN service provider must ensure there is a mechanism on the card to manage unspent funds. Providers must either recoup unspent funds and prevent them from rolling over from month to month, or allow remaining funds to roll over and only add sufficient funds to “top up” the card balance so that it does not exceed the maximum allowable balance for the designated month.
- The HRSN service provider must also ensure there is a mechanism on the card to stop loading or releasing additional funds once the member’s benefit has expired. The funds must not be removed until the day following the final day of the 6-month service period in order to ensure members have enough time to spend the funds.
- HRSN service providers must keep records of card balances and any unspent funds.
- During the biweekly or monthly billing, the HRSN provider may bill for the weekly allowable program costs even if the member does not spend the allotted weekly food funds; however, the HRSN provider may not bill for more than 24 units (weeks) of program costs over the entire duration of the benefit.
- The pantry stocking and fruit & vegetable card claims sent to OHA should reflect the actual amount spent by the member during the 4-week period plus the allowable weekly program costs. See Tables 14 to 16 for examples of how this is billed.
- If an HRSN pantry stocking or fruit & vegetable card service provider is also enrolled as a HRSN O&E service provider and performs activities that align with HRSN O&E activities (refer to [OAR 410-120-2005](#) Table 7), the provider may bill those activities through the HRSN O&E service.

- HRSN O&E should only be billed when the provider’s activities align with HRSN O&E activities and are not duplicative of any other services, including nutrition program costs and delivery.
- For example, an HRSN Nutrition and O&E service provider may connect a member to housing services or help them fill out the HRSN housing request form. This activity is distinct from the nutrition benefit activities and would not be included in program costs and delivery for the nutrition benefit. Refer to Table 13 below for examples of activities included in program costs and what may possibly be billed as O&E.
- HRSN O&E should not be billed if the staff member’s time is being paid through the Community Capacity Building Fund (CCBF) grant.
- Please see the [HRSN Billing Guide Outreach and Engagement and Tenancy Services Section](#) for more detailed HRSN O&E billing information.

Table 13: Examples of Program and Delivery Costs and O&E Activities for the Card Model

Examples of Program and Delivery Costs and O&E Activities for the Box Model		
Base Activities Included in Program Costs and Delivery	Included in Program Costs and Delivery Portion of Service Rate	Possible Supplemental O&E Activities
<ul style="list-style-type: none"> • Printing • Packaging and handling • Mailing • Billing (invoicing & reconciling payments) • Activation costs • Supporting lost and stolen cards 	<ul style="list-style-type: none"> • Accepting referral and setting up member card account • Mailing cards • Helping members activate card • Updating member information for their account • Explaining that the card benefits do not roll over from one month to the next, and helping members strategize on how to use their full benefits • Calling members if provider sees that they have not been redeeming card benefits 	<ul style="list-style-type: none"> • Helping a member apply for additional HRSN benefits by completing the request form. • Helping members connect with other resources to meet social needs. <p><i>Note: Per OAR 410-120-2005 Table 7, activities a-c must have been provided on initial service.</i></p>

Examples of Card Model Service Delivery and Billing

Pantry Stocking

- The HRSN service provider loads \$244 per month (4 units at \$61 each). This day of the month should remain as consistent as possible for each of the 6 months.
- The provider may bill program costs and delivery up to \$36 per month, for a total of \$216.
- If a member spends all the funds in the month, the provider should bill at the end of the month after confirming all funds are spent.
- For examples when the member does not spend all of the funds, see Table 16.

Table 14: Standard loading and spending for pantry stocking card model

Month (4 weeks)	Card Load Amount	Program Costs	Total Amount Billed	Units
1	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
2	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
3	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
4	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
5	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
6	$\$61 \times 4 = \244	$\$9 \times 4 = \36	$\$244 + \$36 = \$280$	4
TOTALS	\$1,464	\$216	\$1,680	24

Fruit & Vegetable

- The HRSN service provider loads \$92 per month. This day of the month should remain as consistent as possible.
- The provider may bill program costs and delivery up to \$35.40 per month, for a total of \$212.40.
- If a member spends all the funds, the provider should bill at the end of the month after confirming all funds are spent.
- For examples when the member does not spend all of the funds, see Table 16.

Table 15: Standard Loading and Spending for Fruit & Vegetable Card Model

Month (4 weeks)	Card Load Amount	Program Costs	Total Amount Billed	Units
1	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
2	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
3	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
4	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
5	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
6	\$23 x 4 = \$92	\$8.85 x 4 = \$35.40	\$92 + \$35.40= \$127.40	4
TOTALS	\$552	\$212.40	\$764.40	24

Examples

Table 16: Example scenarios for providing and billing pantry stocking and fruit & vegetable cards

Example Scenario	Guidance for Provider	Encounter Claims
<p>Example 1 Member is approved for 24 weeks of HRSN pantry stocking card services on 6/24/26 and referred to a provider to begin services.</p> <p>The provider delivers the card to the member on 7/8/26 and uploads \$244 (4 units, \$61 each).</p> <p>On 8/9/26, the provider verifies the member only spent \$200 of the \$244. The provider zeros out the \$44 balance for July and loads \$244 (4 units, \$61 each) for August.</p> <p>The provider reaches out to the member to check understanding that the benefit does not roll over.</p> <p>The member spends all the funds the remainder of the benefit.</p>	<ul style="list-style-type: none"> Once the spending is verified at the month's end, bill for any spent funds and of program costs and delivery. Use the date the funds were loaded, and eligibility was checked on the card as the first claim's date of service (DOS). On the claim, use procedure code S5170 and modifiers U1 (HRSN Waiver Program) and U5 (Direct member Purchase). For months when the member spends the full amount, bill for \$280, which includes food cost (\$244) and program costs and delivery (\$36). For months when the member does not spend all the funds, only bill how much the member spent, plus \$36 for program costs and delivery. On 1/9/27 ensure that the card has been deactivated and no additional funds are issued. 	<p>Claim 1 (month 1): Procedure Code and Modifiers: S5170-U1-U5 DOS: 7/8/26 - 7/8/26 Amount Billed: 4 units, \$236 Units 1-3 = \$70 (\$61 in food costs, \$9 in program costs) Unit 4 = \$26 (\$17 in food costs and \$9 in program costs) Program Costs: \$36 Food costs = \$200</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: S5170-U1-U5 DOS: 8/8/26 - 8/8/26 Amount Billed: 4 units, \$280 Program Costs: \$36 Food costs = \$244</p> <p>Continue to bill for 4 more months (Claims 3-6), through 12/8/26, checking eligibility each month to confirm the member is still Medicaid eligible.</p> <p>Total billed: \$1,636 Total units: 24</p>

<p>Example 2</p> <p>Member is approved for 24 weeks of HRSN fruit & vegetable card services on 6/24/26 and referred to a provider to begin services.</p> <p>The provider delivers the card to the member on 7/8/26 and uploads \$92 (4 units, \$23 each).</p> <p>For 5 months, the provider verifies the member spent all funds.</p> <p>In December, the 6th month, the member only spends \$42.</p>	<ul style="list-style-type: none"> • Once the spending is verified at the month's end, bill for any spent funds and of program costs and delivery. • Use the date the funds were loaded, and eligibility was checked on the card as the first claim's DOS. • On the claim, use procedure code S5170 and modifiers U1 (HRSN Waiver Program) and U5 (Direct Member Purchase). • For months when the member spends the full amount, bill for \$127.40, which includes food cost and program costs and delivery. • For months when the member does not spend all the funds, only bill how much the member spent, plus \$35.40 for program costs and delivery. • On 1/9/27 ensure that the card has been deactivated and no additional funds are issued. 	<p>Claim 1 (month 1): Procedure Code and Modifiers: T2025-U1-U5 DOS: 7/8/26 - 7/8/26 Amount Billed: 4 units, \$127.40</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: T2025-U1-U5 DOS: 8/8/26 - 8/8/26 Amount Billed: 4 units, \$127.40</p> <p>Claim 3 (month 3): Procedure Code and Modifiers: T2025-U1-U5 DOS: 9/8/26 - 9/8/26 Amount Billed: 4 units, \$127.40</p> <p>Claim 4 (month 4): Procedure Code and Modifiers: T2025-U1-U5 DOS: 10/8/26 - 10/8/26 Amount Billed: 4 units, \$127.40</p> <p>Claim 5 (month 5): Procedure Code and Modifiers: T2025-U1-U5 DOS: 11/8/26 - 11/8/26 Amount Billed: 4 units, \$127.40</p> <p>Claim 6 (month 6): Procedure Code and Modifiers: T2025-U1-U5 DOS: 12/8/26 - 12/8/26 Amount Billed: 4 units, \$77.40</p>
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		<p>Unit 1 = \$31.85 (\$23 food, \$8.85 program cost) Unit 2 = \$27.85 (\$19 food cost + \$8.85 program cost) Unit 3 = \$8.85 (only program cost) Unit 4 = \$8.85 (only program cost)</p> <p>Total billed: \$714.40 Total units: 24</p>
<p>Example 3 Member is approved for 24 weeks of HRSN pantry stocking card services on 6/15/26 and referred to a provider to begin services.</p> <p>The provider delivers the card to the member on 7/1/26 and uploads \$244 (4 units at \$61 each).</p> <p>On 8/1/26, the provider verifies the member only spent \$150 of the \$244. The provider zeros out the \$94 balance for July and loads \$244 for August.</p> <p>The provider reaches out to the member to check understanding that the benefit does not roll over.</p> <p>The member spends all the funds the remainder of the benefit.</p>	<ul style="list-style-type: none"> • Once the spending is verified at the month's end, bill for any spent funds and program costs and delivery. • Use the date the funds were loaded, and eligibility was checked on the card as the first claim's DOS. • On the claim, use procedure code S5170 and modifiers U1 (HRSN Waiver Program) and U5 (Direct Member Purchase). • For months when the member spends the full amount, bill for \$280, which includes food cost and program costs and delivery. • For months when the member does not spend all the funds, only bill how much the member spent 	<p>Claim 1 (month 1): Procedure Code and Modifiers: S5170-U1-U5 DOS: 7/1/26 - 7/1/26 Amount Billed: 4 units, \$186 Unit 1 = \$70 (\$61 in food costs, \$9 in program costs) Unit 2 = \$70 (\$61 in food costs, \$9 in program costs) Unit 3 = \$28 (\$19 in food costs, \$9 in program costs) Unit 4 = \$9 (program costs) Program Costs: \$36 Food costs = \$150</p> <p>Claim 2 (month 2): Procedure Code and Modifiers: S5170-U1-U5 DOS: 8/1/26 - 8/1/26 Amount Billed: 4 units, \$280 Program Costs: \$36 Food costs = \$244</p>

	<p>and \$36 for program costs and delivery.</p> <ul style="list-style-type: none">• On 1/1/27, ensure that the card has been deactivated and no additional funds are issued.	<p>Continue to bill for 4 more months, through 12/1/26, checking eligibility each month to confirm the member is still Medicaid eligible.</p> <p>Total billed: \$1,586 Total units: 24</p>
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Dates of Service

- **Card model:** The date of service (DOS) may be the date funds were added to the card or the date the member received the card and is able to use it. For a physical card, the DOS may be the date the card was sent to the member.
- **Box model:** The DOS may be the date the box was delivered to the member (i.e., the date that the member confirmed having received the box, if this information is reasonably accessible), the date the box was sent, or the estimated delivery date.
- If the provider is billing bi-weekly or monthly, they may confirm member eligibility at the beginning of each service time period, rather than each week. The claim for the biweekly or monthly timeframe would then reflect a single DOS for when the service was started.
 - Even though providers may provide services and bill at different frequencies, CCOs should encourage providers to check member eligibility prior to loading the card or delivering the box. If the member is no longer eligible (not covered by OHP) on the DOS on the claim, the provider will not be paid for those services.
- The timeframe between the first DOS and the final DOS cannot be longer than 26 weeks (6 months).
 - For example, if an authorized pantry stocking or fruit & vegetable service is delivered on 7/23/26, the final DOS must not be later than 1/20/27.

Other Nutrition Services

Medically Tailored Meals (MTM) and MTM Assessment

- When applicable, certain services, such as medically tailored meals assessment, should be billed to Medicaid before HRSN if eligible.
 - Traditional Medicaid providers do need to enroll as HRSN providers in order to provide and bill for HRSN services.
 - To bill for one unit per the MTM Assessment service fee schedule (15 minutes), the industry standard usually is that at least 8 minutes was spent with the member on this service. Two units would require at least 23 minutes spent, and so on.

- Units for medically tailored meals should not exceed 3/day, 21/week, 93/ month.
- The date of service (DOS) can be billed based on order date or date of receipt.
 - Subsequent days can be submitted on the same claim, such as Monday the 1st – Friday the 5th. No gaps can exist when billed in a group, such as two weeks on a claim from Monday – Friday but omitting the Saturday and Sunday in between.

Nutrition Education

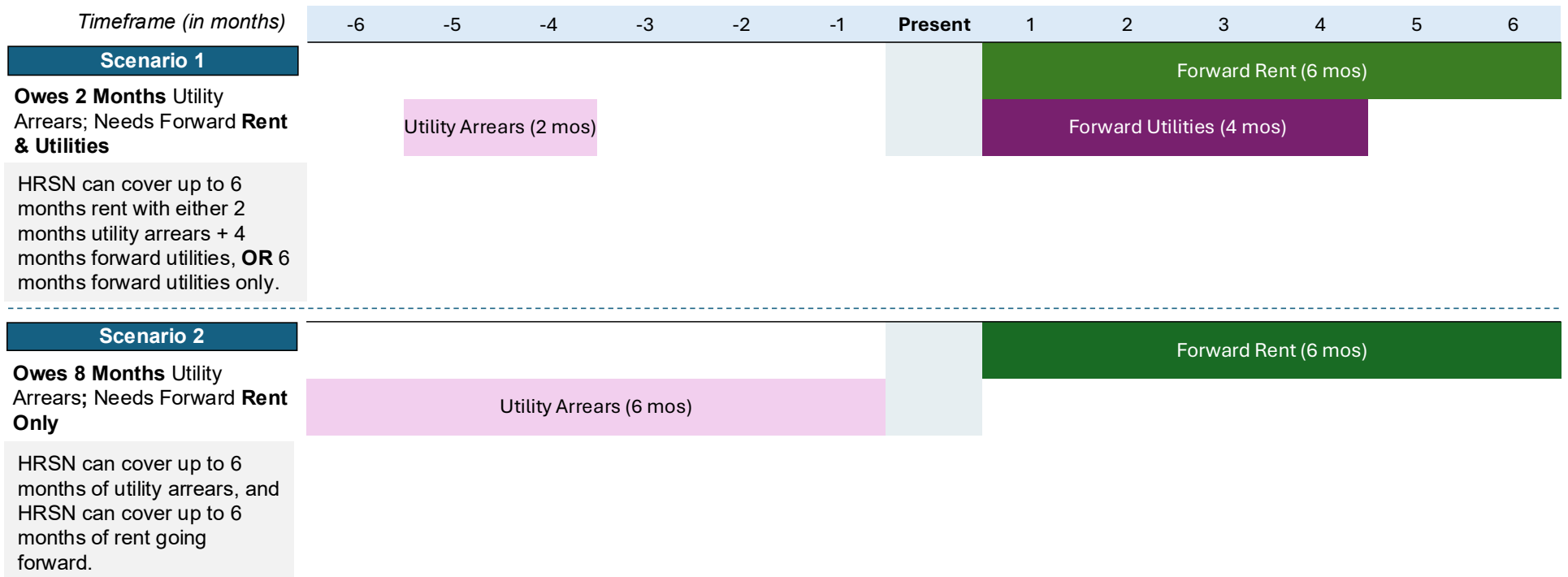
Nutrition education should be billed according to the industry standard. For example, to bill for one unit per the nutrition education fee schedule (30 minutes), the industry standard is that at least 16 minutes are spent with the member on this service. Two units would require at least 46 minutes spent, and so on.

Resources

- [CCO Contracts Forms Page](#), which includes
 - HRSN FAQ
 - CCO HRSN Guidance Document
- [HRSN Service Provider Page](#)
- [Fee Schedule](#)

Appendices

HRSN Housing Supports: Rent and Utility Timeline Examples



Arrears payments must have a date of service on or after May 1, 2024)

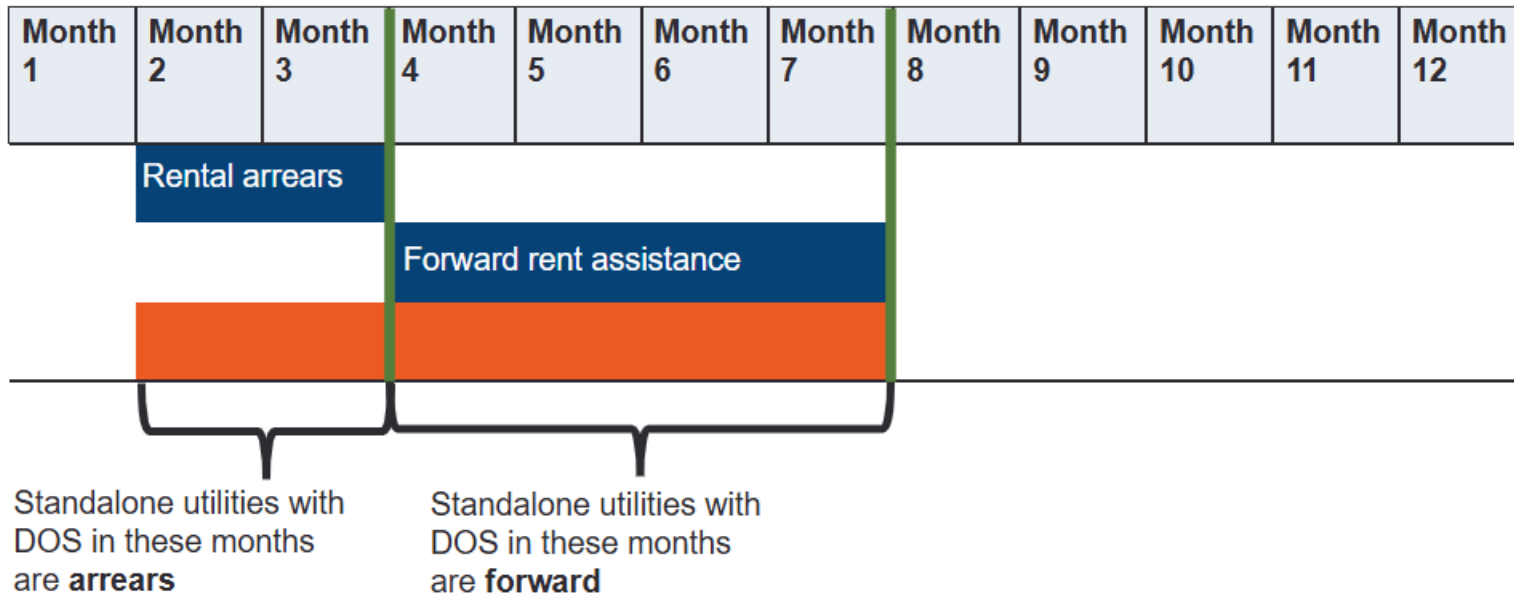
Utility Arrears Forward Utilities Forward Rent

Examples based on Appendix H of the CCO Guidance (Nov 2024).

Example Timeline: Forward versus Arrears

Member begins receiving forward rent assistance

Member **stops** receiving forward rent assistance



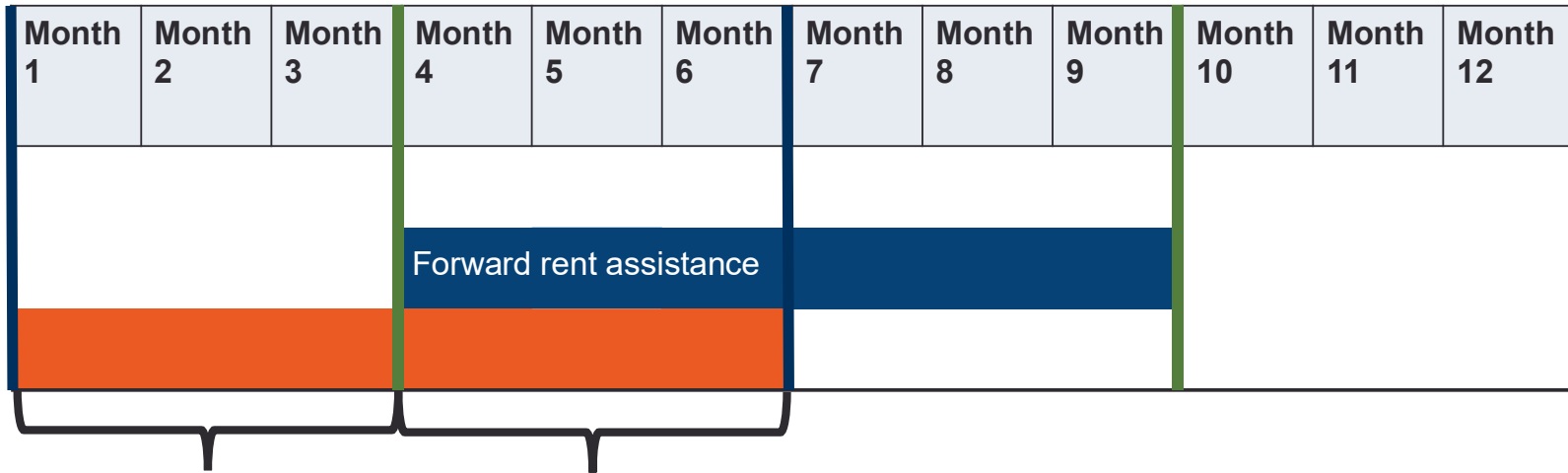
Example Timeline: Forward versus Arrears

Member is authorized for rent and utility assistance

Member begins receiving forward rent assistance

Member **stops** receiving standalone utilities

Member **stops** receiving forward rent assistance



Standalone utilities with DOS in these months are **arrears**

Standalone utilities with DOS in these months are **forward**

Appendix B: HRSN Rent and Utility Financial Assistance and HUD Funding Scenarios

- Prospective or forward rent and utility costs cannot be paid by HRSN as this is considered duplicative.
- This includes HUD voucher programs and project-based programs.
- Rental arrears and utility arrears (if also receiving rental arrears) can be paid by HRSN.
- HRSN services do not count as income for determining eligibility for HUD rental assistance programs.

Scenario 1: Member requests HRSN while on HUD waitlist

Example: Emmeline has fallen behind on their rent while on a waitlist for a HUD voucher.

- Emmeline submits an application for HRSN rent and utility financial assistance.
- While waiting for authorization on their HRSN rent and utility financial assistance, Emmeline receives HUD Section 8 top of list letter.

How HRSN can help Emmeline:

- CCO can refer Emmeline to an HRSN O&E Provider to support Emmeline with her section 8 appointments and inspection.
- Once HUD begins paying rent, the CCO can authorize payment for rent and utility arrears.
- Emmeline can be authorized to receive up to 18 months of tenancy services to support their housing stability (up to September 30, 2027).

Scenario 2: HRSN Eligible Member with HUD Voucher Requests HRSN

Example: Esther is a child in a household that receives HUD Section 8 Housing Voucher rental assistance.

- Esther was recently hospitalized, resulting in her parent losing income and falling behind on their portion of rent and utility payments (30% of total rent).
- Esther's parent requests HRSN rent and utility financial assistance to help maintain their housing stability.

How HRSN can help Esther:

- Esther’s parent can request HRSN rent and utility financial assistance for the household to pay for the member portion of the rent and utility arrears to maintain their housing stability.
- Esther’s parent can be authorized to receive tenancy services for up to 18 months (up to September 30, 2027) to help maintain housing stability for Esther.

Scenario 3: HUD Excluded HRSN Eligible Member Requests HRSN

Example: Patrick is an HRSN-Eligible member that lives in a 4-bedroom house with 4 other people.

- The other people living in the house are receiving section 8 vouchers; however, Patrick is not eligible for an HUD voucher.
- Total rent for the house is \$2,000; Patrick’s portion of the rent is \$400.
- Patrick requests HRSN rent and utility assistance to help with his portion of the rent.

How HRSN can help Patrick:

- The CCO can authorize Patrick for HRSN rent assistance up to the 1-bedroom UPL for Patrick’s share of rent.
- The CCO can pay up to 6 months of total rent and utility assistance, both forward and arrears (depending on Patrick’s needs).
- Patrick can be authorized to receive tenancy services for up to 18 months (up to September 30, 2027) to help him maintain housing stability.

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