

HRSN Training Series: Member Eligibility and Self-Attestation

September 24, 2024



Zoom Tips



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- It will be shared with participants after the presentation.



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Today's Agenda

1 | Outreach and engagement overview

Learn about HRSN outreach and engagement (O&E) services, the role of an O&E provider, and important considerations before providing O&E services.

2 | Member eligibility and self-attestation

Understand the eligibility requirements for O&E, what “presumed eligible” and “self-attestation” mean for outreach and engagement, and how to track O&E services.

3 | Billing

Learn about what services you can bill for as an HRSN O&E service provider, how many hours you can bill for, and how much you can be paid for O&E services.

4 | Case examples and resources

Walk through different case examples and see how O&E service can look in practice. Review resources available to HRSN service providers.

What are HRSN Outreach and Engagement services?



Health-Related Social Needs

Health-Related Social Needs (HRSNs) benefits are a new OHP benefit that can help eligible members improve their health.

HRSN benefits include:

- Climate supports
- Outreach and engagement services
- *Coming in November 2024:* Housing supports
- *Coming in 2025:* Nutrition supports



What are Outreach and Engagement Services?

OHP will pay for eligible OHP members to get outreach and engagement services to improve their health and wellbeing.

HRSN O&E benefits can include:

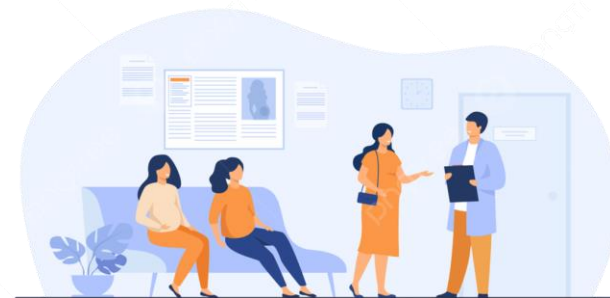
- Help requesting HRSN climate, housing, and nutrition supports.
- Connecting to other programs and benefits.
- And more! We'll give more examples later.



What is the role of an Outreach and Engagement service provider?

HRSN Outreach and Engagement service providers:

- Identify OHP members who may be eligible for HRSN services and help them get those services.
- Connect members to healthcare and non-healthcare services.
- Are accessible, culturally-specific, and responsive.



Before providing HRSN Outreach and Engagement services



First step for an HRSN O&E service provider

Before providing HRSN outreach and engagement services, it is important to first:

1. Be enrolled as an HRSN service provider for outreach and engagement.
 - Either with Open Card, your local coordinated care organization (CCO), or both.
2. Get set up to bill and get paid.
 - Either with Open Card, your local CCO, or both.

Note: It is important to enroll **before providing services** to ensure that you can get paid.

More resources

- To learn more about enrolling as an HRSN service provider with Open Card, see the [HRSN Provider Enrollment module](#).
- To learn more about enrolling as a provider with your local coordinated care organization (CCO), [contact the CCO directly](#).



Before providing HRSN O&E services

- Once you are enrolled as an HRSN service provider, but before you provide services, **you must check if the individual is eligible for HRSN services.**
- As an HRSN service provider, you can “**presume**” that an OHP member is eligible for an HRSN service if you have reason to believe they meet the criteria.
- This could include if the member told you they meet the eligibility criteria, even if they don’t show you proof. This is called “**self attestation.**”



Self-attestation for O&E

- **An OHP member can tell you that they meet the requirements to get HRSN O&E services by:**
 - Completing and signing an HRSN request form.
 - Telling you that they meet the requirements (in-person or on the phone).
 - Signing a form from their coordinated care organization (CCO) electronically.
- If we find that the member is not in an HRSN covered population, we might not approve future services.



Eligibility for HRSN Outreach and Engagement services



Eligibility for HRSN O&E services

To be eligible for HRSN O&E services, a person must meet all the eligibility requirements:

- 1 Be a current OHP member AND
- 2 Be part of a presumed eligible group AND
- 3 Be presumed to have an HRSN clinical risk factor AND
- 4 Have a need for services that improve their health and wellbeing (social risk factors)*

*Other HRSN benefits may have their own additional criteria. Visit the [HRSN provider webpage](#) to learn more.

1. OHP member

1

Be a current OHP member

- **To be eligible for HRSN services, a person must be on OHP.**
- You must verify that the person has OHP before providing services, otherwise you might not get paid. You can do this by:
 - Checking MMIS.
 - Calling Oregon Eligibility (ONE) Customer Service at 800-699-9075.
- **Determine if the OHP member is enrolled in a CCO or Open Card.** You'll have to be contracted with their CCO or Open Card to bill for services you provide.
- If the person does not have OHP, you can help connect them to enrollment help (note: connecting to enrollment is not a billable HRSN activity). Options include:
 - Visiting a local [Oregon Department of Human Services \(ODHS\) office](#)
 - Finding a local [OHP-certified community partner](#).
 - Applying online: <https://one.oregon.gov/>

2. Presumed eligible group

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Be presumed part of an eligible group

HRSN eligible groups include people who are or have been:

- Released from incarceration in the past 12 months.
- Discharged from an HRSN-eligible behavioral health facility in the past 12 months.
- Current or past involvement in the Oregon child welfare system.
- Transitioning from Medicaid-only to dual eligibility (Medicaid and Medicare) status within the next three months or have transitioned in the past nine months.
- Homeless or at risk of becoming homeless.

3. HRSN clinical risk factor

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Be presumed to have an HRSN clinical risk factor

- Complex behavioral or physical health condition
- Developmental disability
- Needs assistance with Activities of Daily Living/Instrumental Activities of Daily Living or is eligible for Long Term Services and Supports
- Current or past interpersonal violence experience
- Repeated emergency department use
- Repeated crisis encounters
- Currently pregnant or 12 months postpartum and at risk of certain clinical factors
- Less than six years of age and at risk of certain clinical factors
- More than 65 years of age and at risk of certain clinical factors

This is not an all-inclusive list. View the [Clinical Risk Factor Crosswalk](#) to see a full list.
Any clinical risk factor for climate or housing apply as the O&E clinical risk factor.

HRSN O&E Clinical Risk Factors

Health conditions that:

- Get worse when the member gets very cold
- Get worse during hot weather
- Get worse when air quality is poor
- Require temperature-controlled medication
- Require a powered medical device

Complex physical health conditions

- Persistent, disabling, progressive or life-threatening condition(s) that require treatment. Examples may include acute or chronic conditions like:
 - Conditions a person was born with
 - Blindness
 - Disabling dental conditions
 - Neurological diseases
 - Cardiovascular diseases
 - Pulmonary diseases
 - Gastrointestinal diseases
 - Liver diseases
 - Renal diseases
 - Endocrine diseases
 - Hematologic disorders
 - Musculoskeletal conditions
 - Infectious diseases
 - Cancers
 - Autoimmune disorders
 - Immunodeficiency disorders

Being a child under age 6

Being 65 years old or older

Complex behavioral health condition

- A mental health condition or substance use disorder that requires treatment or supports to achieve and maintain health goals and stability.

Developmental or intellectual disability

- An intellectual or developmental disability that requires services or supports to achieve and maintain health goals and stability.

Difficulty with self-care and daily activities

- Needing help self-care or daily tasks, called either:
 - Activities of daily living (ADLs)
 - Instrumental activities of daily living (IADLs)
- Qualifying for Medicaid covered long-term services and supports (LTSS) through one of these:
 - Oregon Department of Human Services (ODHS)
 - Aging and People with Disabilities (APD)
 - Office of Developmental Disabilities Services (ODDS)

Experiencing abuse or neglect

- Experiencing now or in the past domestic, sexual or psychological violence, abuse or neglect

Pregnant or gave birth in past 12 months

- Currently pregnant or gave birth in the past 12 months.

Repeated use of emergency room or crisis services

- Repeated emergency department care (defined as two or more visits in the past 6 months or four or more visits in the past 12 months)
- One crisis service encounter in the past 6 months or two encounters in the past 12 months, including:
 - Behavioral health mobile crisis, crisis respite services or school behavioral health crisis services as defined by OAR 411-320-0080
- Any length of stay in a jail or detention center
- Any stay in an emergency shelter
- Any stay in emergency foster care
- Being required to leave a housing or behavioral healthcare program (shelter, day habilitation program, etc.), a school or an early childhood program in the past year

4. HRSN social risk factor

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Have a need for services that improve their health and wellbeing (social risk factors).*

- **To be eligible for HRSN outreach and engagement services**, you must believe that the member has a need for these services to support their health and wellbeing (also called “Social Risk Factors”).
- Each HRSN service area (like housing, nutrition, and climate) has additional eligibility requirements.

Tracking O&E services you provide

When you are providing Outreach and Engagement services, you must keep track of:

- Date of service
- Duration = time spent on the activity or units being billed
- Description = type(s) of activity
- Outcome = result of activity (e.g., connected to laundry, HRSN request sent, OHP paperwork completed.)

How do I track this?

- You can use whatever tracking system that works best for your organization.



Let's recap how to provide HRSN O&E services

- ❑ Enroll as an HRSN service provider for O&E with Open Card and/or your local CCO.
- ❑ Get set up to bill/get paid with Open Card and/or your local CCO.
- ❑ **Before providing HRSN services**, check that the person you are working with meets the eligibility criteria (it is okay to accept the information they tell you).
 - ❑ Check if they are an OHP member.
 - ❑ Check which plan they have for their OHP (CCO or Open Card).
 - ❑ Verify that you are contracted with the plan that they have (you can only get paid if the person has OHP and is enrolled in a plan that you contract with).
 - ❑ Determine if the OHP member is part of a presumed eligible group.
 - ❑ Ask if they have an HRSN clinical risk factor.
 - ❑ Determine if they have a demonstrated need for O&E services.
 - ❑ Track how much time you spent providing O&E services.
- ❑ **After** providing O&E services, bill their plan and get paid.



Optional process recommendations

Are HRSN service providers required to document “Presumed Eligibility”?

While we do not require documentation of how you determine presumed eligibility, it is a good idea to have a documented process at your organization for how you determine it.

Ways to document your presumed eligibility process can include:

- A check box on an intake form (For example: “Check the box if you have experienced one of these clinical risk factors”).
- Keeping a copy of the OHA HRSN request form on file in a secure location.
- A form your organization creates for the member to sign.
- Notes in the Community Information Exchange (CIE) platform you use (if applicable).

Also consider having a process around how you protect member information:

- While not every HRSN service provider must be HIPAA-compliant, you should protect individual’s information to the greatest extent possible.

What services can you bill for as an HRSN service provider for O&E?



As an HRSN O&E provider, you can bill for:

- Reaching out to OHP members that you think are in an HRSN covered population.
- Helping an OHP member who asks you for HRSN services.
- Reaching out to OHP members you think might need climate, housing, nutrition, or O&E services.
- Helping an OHP member submit materials to keep OHP, SNAP, or other benefits.
- Checking if an OHP member is enrolled in a CCO or Open Card.
- Verifying that an OHP member is “presumed eligible” for HRSN services.
- Sending HRSN request forms to a member’s health plan (CCO or Open Card).
- Connecting OHP members to places where basic needs can be met, such as showers, laundry, shelter, and food.
- Connecting an OHP member to medical, peer, social, educational, legal, and other related services.

In other words, an O&E provider can bill for:

Many services that help OHP members who meet HRSN O&E requirements get or stay healthy.

How much can I bill for O&E services?

Each eligible member can get 30 hours of O&E services per year.

- O&E services are billed by unit. One unit is 15 minutes at a rate of \$20.
- To bill for one unit, you must spend at least 8 minutes on an O&E service. For example:
 - If you spend 3 minutes on an O&E activity, you **cannot bill for a unit (\$0)**.
 - If you spend 23 minutes, you can bill for **2 units (\$40)**
 - If you spend 30 minutes, you can bill for **2 units (\$40)**.
- View the [O&E fee schedule](#) to learn more.



Let's go over some examples



Case example 1: Louise

- Louise (she/her) is 27 years old and thinks she is about 5 months pregnant.
 - She comes into New Beginnings Resource Center to ask for resources.
 - New Beginnings is contracted as an HRSN Service Provider with the local coordinated care organization (CCO).
 - Louise told a health navigator at New Beginnings that she was in jail two months ago. She needs resources for her pregnancy and help finding a job.
 - Her health navigator checks MMIS and verifies that she is on OHP and enrolled with the local CCO that New Beginnings contracts with.
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- **Is Louise eligible for HRSN Outreach & Engagement services?**
 - **If so, what kind of services can New Beginnings bill her CCO for?**
 - **What would you document and track?**



Navigator's workflow: Before services

- ❑ Confirm New Beginnings is enrolled as an HRSN O&E provider with the local CCO.
- ❑ **Before** providing services, the navigator checked that Louise met eligibility criteria:
 - ❑ Verified that Louise was an OHP member.
 - ❑ Checked which plan Louise had (confirmed it was a CCO).
 - ❑ Verified Louise's CCO was the same one New Beginnings contracted with.
 - ❑ Navigator presumed that Louise was part of an eligible group because she was in jail two months ago (*Released from incarceration in the past 12 month*).
 - ❑ Louise was presumed to have a clinical risk factor because she was pregnant.
 - ❑ The navigator presumed that Louise needed O&E services to help her be healthy (social risk factor).
- ❑ After confirming eligibility, the navigator helped connect Louise to resources.



Louise workflow: Providing services

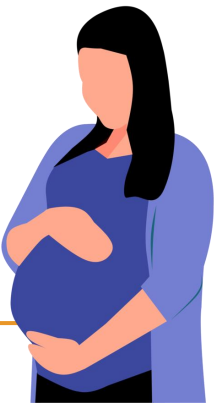
While providing Louise with services, the navigator used the New Beginnings case management system to track how much time was spent with Louise.

The navigator helps Louise with the following O&E services:

- ❑ Connect with Worksource Oregon for job help (30 minutes).
- ❑ Reviewed local resources and connect to WIC and prenatal care (15 minutes).
- ❑ Ask about other needs and help fill out an HRSN request form for an air conditioner (15 minutes).

Invoicing the CCO:

- After providing HRSN O&E services to Louise, New Beginnings was able to bill the local CCO for 4 units of O&E services, totaling \$80.



Case example 2: Gene

- Gene (they/them) is 45 and has lived in Oregon their whole life.
 - Gene was in foster care as a child.
 - During a visit, staff noticed that Gene visits the ED frequently, so after the visit they refer them to a community health worker.
 - Gene does not have a doctor and struggles to navigate their OHP Open Card.
-
- **Is Gene eligible for HRSN Outreach & Engagement services?**
 - **If so, what kind of services can the hospital bill Open Card for?**
 - **What would you document and track?**



CHW's workflow: Before services

- Confirm the CHW is enrolled as an HRSN O&E provider with Open Card.
- Before** providing services, the CHW checked that Gene met eligibility criteria:
 - Verified that Gene was an OHP member with Open Card (the ED had checked MMIS that morning for the appointment).
 - CHW presumed that Gene was part of an **eligible group** because the intake form indicated Gene was in foster care in Oregon as a child.
 - CHW presumed that Gene had a **clinical risk factor** from their case notes (repeated emergency department use).
 - The CHW determined that Gene needed O&E services because it would help them stay or be healthy (social risk factor).
- Once eligibility was confirmed, the CHW could get paid for helping connect Gene to resources.



Gene workflow: Providing services

Once the CHW confirmed that Gene was eligible for HRSN O&E services, they could bill for services.

The CHW documented the following activities:

- Helped Gene find a primary care provider that was taking new OHP Open Card patients and set up an appointment (30 minutes)
- Called non-emergency medical transportation to set up a ride to Gene's appointment (10 minutes)

Invoicing Open Card (Open Card works with a contractor, Ayin, for invoicing):

- After providing HRSN O&E services to Gene, the CHW was able to bill Ayin for 3 units of O&E services, totaling \$60.



Questions and answers

Please put your questions into the chat!



Upcoming Sessions



★ **HRSN Training Sessions: Typically, on the fourth Tuesday of each month**

- **Tuesday, October 22, 1 – 2:30 p.m. [Register here.](#)**
HRSN housing services and member eligibility overview.

HRSN Training Modules: Self-paced, short YouTube videos on various topics.

This module, and more HRSN provider trainings, are available on the [HRSN Provider Training webpage.](#)

We value your feedback

To help us further improve our future trainings for HRSN service providers, please fill out this anonymous, five question survey:

<https://www.surveymonkey.com/r/Y87W7LK>

