HRSN Provider Claim/Invoice Submission Guidelines

Benefit	Service	Place of Service Options	Diagnosis Options	From Service Date	To Service Date	Quantity / Limits	Documentation Required
Home Changes for Health	Home Changes for Health devices & installation	Home (12)	N/A ¹	Date the device was ordered or service delivered.	N/A OR Same as From Service Date. No date ranges.	Per Device. 1 device per request.	No
O&E	Outreach & Engagement	Telehealth (02), Outreach Site/Street (27), Office (11)	Z55.0, Z58.81, Z59.00, Z59.10, Z59.11 ,Z59.12, Z59.19, Z59.48, Z59.6, Z60.8	Date the O&E was provided	N/A OR Same as From Service Date. No date ranges.	Per 15 Minutes. Annual limit of 30 hours per member.	No

Notes:

1 Diagnosis information will be collected and established during assessment and authorization processes. The diagnosis is not required to be submitted during the payment process and will be attached to the claim based on the approved authorization. This also applies to all housing services below.

Benefit	Service	Place of Service Options	From Service Date	To Service Date	Quantity / Limits	Documentation Required
Monthly R	Rent/Temporary Housing and	Utility Costs				
Housing	Forward rent assistance (including bundled utilities if applicable)	Home (12), Group Home (14)	The first calendar date of the month the rent is for.	N/A OR Same as From Service Date. No date ranges.	Per Month. Limit 1 per request. If you are submitting for multiple months of rent, you must enter multiple service lines - one for each month of rent with the appropriate date of service for each entry.	No
	Forward utility assistance (not bundled with rent assistance)		Monthly Bill: The first date within the utilities service period.			
			Multi-month Bill: A submission is required for each month of the utility service.		The dollar amount billed should be divided over the number of months included in the utility service. The date of service for the first submission is the first date within the utilities service period. The date of service for each subsequent month, will be the same calendar day of that following month. All dates of service will fall within the service period.	
	Rent arrears assistance (including bundled utilities if applicable) For Months Member was on Plan		The second calendar date of the month the rent is for. ²		Per Month. Limit 1 per request. If you are submitting for multiple months of rent, you must enter multiple service lines - one for each month of rent with the appropriate date of service for each entry.	
Utilities A	rrears & Setup					
	Utilities Arrears	Home (12), Group Home (14)	Monthly Bill: The first date within the utilities service period. ²	N/A OR Same as From Service Date. No date ranges.	Per Month. Limit 1 per request. Must submit multiple requests if requesting reimbursement for more than one month.	No
Housing			Multi-month Bill: A submission is required for each month of the utility service. ²		The dollar amount billed should be divided over the number of months included in the utility service. The date of service for the first submission is the first date within the utilities service period. The date of service for each subsequent month, will be the same calendar day of that following month. All dates of service will fall within the service period.	
	Utilities Set-Up	Home (12), Group Home (14)	The date of the utilities set up. The start and end date should be the same.	N/A OR Same as From Service Date. No date ranges.	Per Instance. Limit 1 instance per request.	No

² If the months of rent and/or utilities include dates that precede the member's eligibility effective date, special billing instructions on the following page and work with the care coordinator or claims processing entity for specific direction on how to submit a claim that can be accepted and paid.

Benefit	Service	Place of Service Options	From Service Date	To Service Date	Quantity / Limits	Documentation Required	
Other Ho	Other Housing Services						
Housing	Forward rent assistance (including bundled utilities if applicable) - Per Day	Home (12), Group Home (14)	The first date for which reimbursement has been authorized and is being requested.	The last date for which reimbursement has been authorized and is being submitted.	Per Day. Quantity should match the date range provided. Submit separate requests if there is a break in the date range. The date range cannot span two calendar months. A request should be submitted for each calendar month. Do not bill more than 28 units in a calendar month. More than 28 days should be billed as monthly assistance.		
	Hotel/Motel Stays	Temporary Lodging (16)	The first date for which reimbursement is being submitted.	The last date for which reimbursement is being submitted.	Per Day. Quantity should match the date range provided. Submit separate requests if there is a break in the date range. The date range cannot span two calendar months. A request should be submitted for each calendar month.	No	
	Storage Fees	Home (12), Group Home (14), Other (99)	The first of the month for which the storage fees were incurred.	N/A OR Same as From Service Date. No date ranges.	Per Month. Limit 1 per request. Must submit multiple requests if requesting reimbursement for more than one month.		
	Tenancy Services	Telehealth (02), Office (11) Home (12), Group Home (14), Temporary Lodging (16), Outreach Site/Street (27), Other (99)	Date the services were provided	N/A OR Same as From Service Date. No date ranges.	Per 15 Minutes.		
	Medically Necessary Home Accessibility Modifications	Home (12), Group Home (14)	The start date of the modification work.	The end date of the modification work.	Per Instance. Total fee schedule limit applies for the lifetime of the benefit		
	Medically Necessary Home Remediations	Home (12), Group Home (14)	The start date of the remediation work.	The end date of the remediation work.	Per Instance. Total fee schedule limit applies for the lifetime of the benefit.		

Special Guidance for Rent and Utilities Arrears that pre-date the member's eligibility

	Date of Service	Example
Rent arrears assistance (including bundled utilities if applicable) - For Months	Month: Month that the Member receives service. Day: Closest day <u>after the first</u> of the	Member has rent arrears for September, October, and November 2024; Member enrolled in OHP/health plan November 11, 2024. DOS for November rent: 11/11/24, DOS for October rent: 11/12/24, DOS for September rent: 11/13/24
Before Member was on Plan	month, and OHP enrollment effective Date that is not a date that already has a monthly rent payment billed. If multiple arrears months, order DOS from most recent month to least recent month.	Member has rent arrears for September, October, and November 2024; Member enrolled in OHP/health plan December 1, 2024. DOS for November rent: 12/2/24, DOS for October rent: 12/3/24, DOS for September rent: 12/4/24
		Member has rent arrears for September, October, and November 2024; Member enrolled in OHP/health plan November 1, 2024. DOS for November rent: 11/2/24, DOS for October rent: 11/3/24, DOS for September rent: 11/4/24
Utilities Arrears	Month: Month that the Member receives service. Day: First day OHP enrollment effective date and closest day that falls after the first day of the utilities billing period.	Member is eligible for HRSN in November, needs utilities arrears for September and Octobe DOS for utilities accrued in Oct: Nov. 1, DOS for utilities accrued in Sept: Nov. 2, etc.
	If multiple utilities months, order from most recent month to least recent month.	

Additional Notes:

• A provider is able to submit multiple reimbursement requests for a single member in a single submission using the online invoicing platform available at https://invoicing.ayin.com/

•	Members and Providers will be required to submit documentation as part of the authorization process and this will be kept on file for future reference. However, unless explicitly stated otherwise no additional documentation beyond the electronic or paper claim submission will be required to support claims payment.	
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