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Department: Benefit Management & Pharmacy Services	
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PURPOSE

To define the approval criteria and review process for requests for hotel or motel lodging.
To define the approval criteria and review process for rental support including first and last and/or rent payment(s).

Temporary housing is allowed under Health Related Services. Funding for community housing initiatives are covered under the Community Benefit Initiative program. Housing services for individual CCO members are covered under Flexible Services.

45 C.F.R. § 158.150; 45 C.F.R. § 158.151; 410-141-3845; 42 CFR 438.402-408; OAR 410-141-3835 through 3915; OAR 410-120-1280

DEFINITIONS

“Health-Related Services” means non-covered services under Oregon’s Medicaid State Plan intended to improve care delivery and overall member and community health and well-being, as defined in OAR 410-141-3845. Health-related services include flexible services and community benefit initiatives.

“Community Benefit Initiatives” (CBI) means community-level interventions focused on improving population health and health care quality. CBI programs are not exclusive to members.

“Flexible Services” means those services that are cost-effective services offered as an adjunct to covered benefits for an individual member or group of members. Flexible services are exclusive to



members of the CCO.

PROCEDURES

HOTEL/MOTEL LODGING

1. CCO members will be approved for motel or hotel lodging when:
 - 1) The member has a referral from a medical provider that documents medical necessity for the housing request
 - a) The referral should be in writing, although oral referrals can be approved by senior management staff on a case-by-case basis
 - b) Medical necessity indicates the member is either medically fragile (e.g. newborn, ongoing chemotherapy or dialysis, oxygen dependent) or in need of a clean dry shelter to recuperate from a medical procedure
 - c) Requests must be approved by a care team including a Medical Director
2. The member must have a Care Coordinator and an active case
3. The motel or hotel has been approved by AllCare
 - 1) The least costly option should be used when appropriate
4. The Member must have:
 - 1) Valid identification such as a current driver's license, State ID, or US passport
 - 2) Debit or credit card for incidentals
5. The stay is limited to (up to) 21 days
 - 1) Stays cannot exceed 21 days total in a rolling six month period without Medical Director approval
6. All flexible spending rules must be observed in the approval process (see HRS Flexible Spending Policy)
 - 1) Exceptions may be made in State or Federal declared States of Emergency
7. The member must abide by the rules of the motel or hotel
 - 1) The CCO can revoke approval with 24 hour notice if the member has caused damage to the room
8. The member's pets may also be allowed for the duration of the stay if allowed by the rules of the motel or hotel AND if they are a ADA registered service animal
9. Additional guests including children must be approved by the plan and accounted for by the motel or hotel
 - 1) The CCO can revoke approval with 24 hour notice if the member has additional guests that are not approved
10. For an approved stay the member will receive an approval letter documenting the approval duration and the rules for the stay
 - 1) For continuations, an amended approval letter will be provided
11. Members who are not approved will receive a refusal letter

12. Members who break the rules outlined above will receive a refusal letter and room payment will cease 24 hours following issue of the refusal letter

Hotel/motel Lodging will not be approved when:

1. The member or anyone staying with the member as an approved guest has previously broken the rules or been evicted from any partner hotel or motel while staying as part of an AllCare Flex Request in last 12 months
2. The member has been housed for 21 days or more within the last 6 months
 - 1) This includes if they were a guest (spouse, child, parent, etc.) while staying with another member and the approval was under the other's member's ID
3. The member is actively using illegal substances
4. The plan is aware the member will not comply with the rules of the hotel or motel
5. The member has alternate shelter options available or alternate payer sources available
 - 1) The CCO is the payer of last resort
6. The member has received 21 days of lodging from the CCO and there have been less than six months from the end of the prior 21 days of lodging
 - 1) For example, a member was lodged in a partner hotel for 21 days from September 1 through the 21st. They would not be eligible for another hotel until the following March 22nd.
 - 2) First and last month rent for move in purposes would count as 60 days of assistance
 - 3) Rental application, late payment, or eviction fees do not count towards the time duration
7. Housing supports such as utility payments, moving assistance, home repairs, etc. do not apply to this policy are considered separately as flexible spending requests

RENTAL ASSISTANCE

1. CCO members will be approved for rental support when:
 - 1) The member does not have funds for rent or for fees associated to obtain or remain in a rental home
 - 2) No medical necessity is required for rental supports
 - 3) The member must have a Care Coordinator and an active case
 - 4) The landlord or rental company must have a W9 form on file with AllCare Health and agree to take payment from the CCO
 - 5) Supports are considered by household when provided, not by member
 - a) Multiple members living together would be counted as one household for rental supports
2. Rental supports used for rent or first/last payments are limited to two months' rent per rolling 12 month period.

Rental supports will not be approved when:

1. The request is for a refundable deposit that would be repaid to the member

2. The payment is to the member, a non-landlord (e.g. friend of member) or another individual without a W9 on file
3. The member has alternate shelter payer sources available
 - 1) The CCO is the payer of last resort
4. The household has received 60 days of rental support from the CCO and there have been less than twelve months from the prior 60 days of support
 - 1) For example, rent was provided by the CCO for two months in September for September and October. The household would not be eligible for another hotel until the following November.

OVERSIGHT & MONITORING

Initial approval must come from senior management staff: Director level or higher. Ongoing stays beyond one week must be approved by a care team including a Medical Director. The Care Coordination team must check in with the member daily or on an agreed upon scheduled basis.

REPORTING

1. External Reporting
 - a. All data is reported to finance and to OHA on the exhibit L

SUPPORTING POLICIES

All HRS How-to. This is a tip sheet

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