



In partnership with Health Share of Oregon, Welcome to this HRSN training session.

# Health Related Social Needs (HRSN) Capacity Building for Community Based Organizations

For now, enjoy the music...





Session #4:

# Common Policies and Procedures, Documentation and Invoicing for HRSN Services

May 1, 2024

# CSH Team



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## About CSH

CSH collaborates to advance solutions that build equity in our communities by linking services, housing, and healthcare to improve the lives of vulnerable people, maximize public resources, and build healthy communities.



# HRSN Capacity Building Series

Session	Topic	Audience	Date
Session 1	<b>Agency Readiness and Business Planning</b>	Leadership, Program	March 20, 2024
TA 1	<b>Completing the Readiness Assessment for HRSN Services</b> 9:00am – 10:00am Group TA 10:00am – 11:00am Individual TA	Leadership, Program	March 27, 2024
Session 2	<b>Budgeting, Services Costs and Funding HRSN Services</b>	Leadership, Fiscal, Program, IT	April 3, 2024
TA 2	<b>Using the Budget Tool for Startup Costs</b> 9:00am – 10:00am Group TA 10:00am – 11:00am Individual TA	Leadership, Fiscal, Program	April 10, 2024
Session 3	<b>Participant Enrollment in HRSN, Referral and Workflow Adaptation and the Role of the Community Information Exchange (CIE)</b>	Program, IT	April 17, 2024
TA 3	<b>Examining Workflow Adaptions and the Role of the CIE</b> 9:00am – 10:00am Group TA 10:00am – 11:00am Individual TA	Program, IT	April 24, 2024
<b>Session 4</b>	<b>Common Policies, Documentation and Invoicing</b>	<b>Fiscal, Program, IT</b>	<b>May 1, 2024</b>
TA 4	<b>Developing Policies, Documentation and Invoicing for HRSN Services</b> 9:00am 10:00am Group TA 10:00am – 11:00am Individual TA	Fiscal, Program, IT	May 8, 2024

# Today's Learning Objectives



Participants will learn what documentation requirements are for delivery and payment of HRSN services



Participants will learn the payment invoicing process for delivering HRSN services



Participants will learn best practices in documentation for Medicaid funded services.

# What Health Related Social Needs (HRSN) Services are Covered?



## Housing

- Housing Transition Navigation Services
- Tenancy Sustaining Services
- Temporary Rental Assistance
- Utility Costs
- Medically necessary home modifications



## Nutrition

- Nutrition education
- Assessment for medically tailored meals
- Medically tailored meals
- Meals
- Pantry stocking
- Fruit and vegetable Rx



## Climate

- Provision of medically necessary devices including:
  - Air conditioners
  - Heaters
  - Air filters
  - Refrigeration
  - Power supplies



## Outreach and Engagement

- Outreach to individuals eligible for HRSN services
- Sharing information necessary for HRSN assessment
- Completing HRSN referrals
- Providing support with benefits navigation and enrollment



# Best Practices in Medicaid Documentation



# Why



To honor and provide our best care to clients



To support staff and organizational needs



To better tell our story with more data

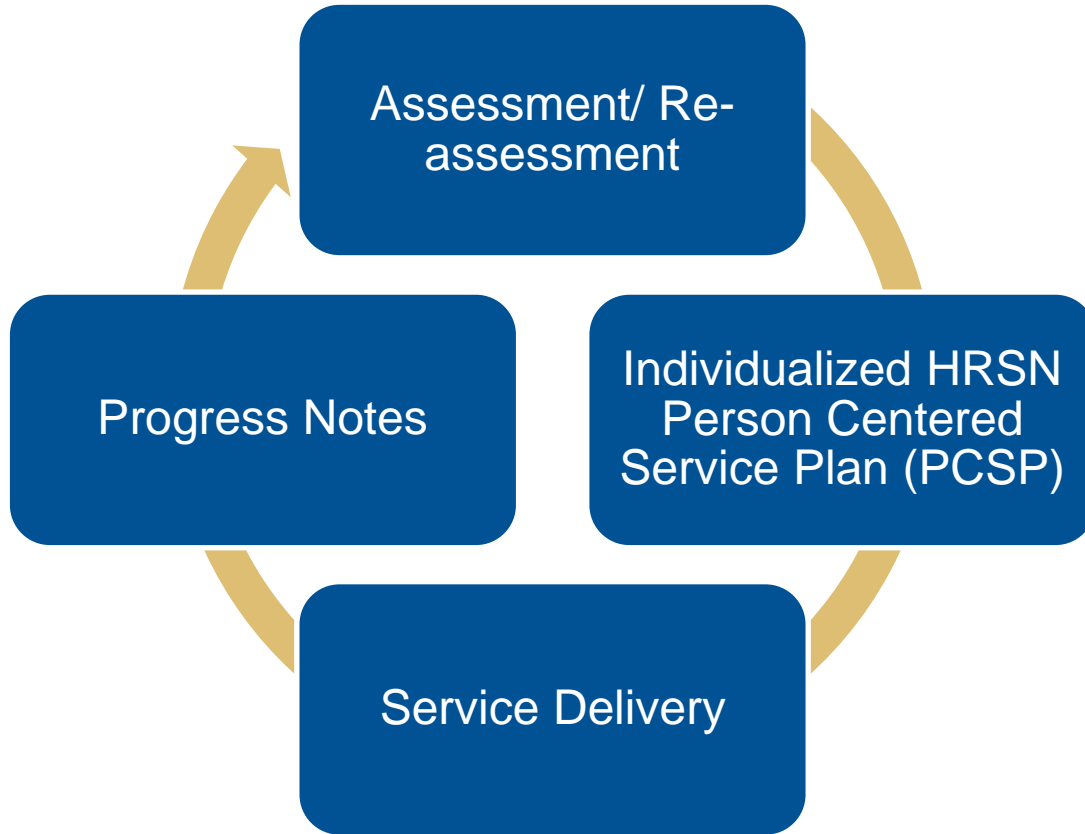
IF IT'S NOT  
DOCUMENTED  
IT DIDN'T  
*Happen*

# What is the “Golden Thread?”

- "An idea or feature that is present in all parts of something, holds it together, gives it value" Oxford Dictionary
- In Healthcare, it is defined as a way to consistently present relevant information from the Person-Centered Service Plan (PCSP) throughout all documentation for a client, *tying together* a narrative of a client's experience as evidence of medical necessity



## Health Related Social Needs Services- Documentation Thread



### *Golden Thread*

An external reviewer must be able to clearly track the need for the services  
(Assessment/Re-assessment)

Then understand how these are translated into goals and proposed activities  
(Individualized Service Plan)

The proposed activities are turned into actions  
(Service Delivery)

And, then written in progress notes  
(Progress Notes)

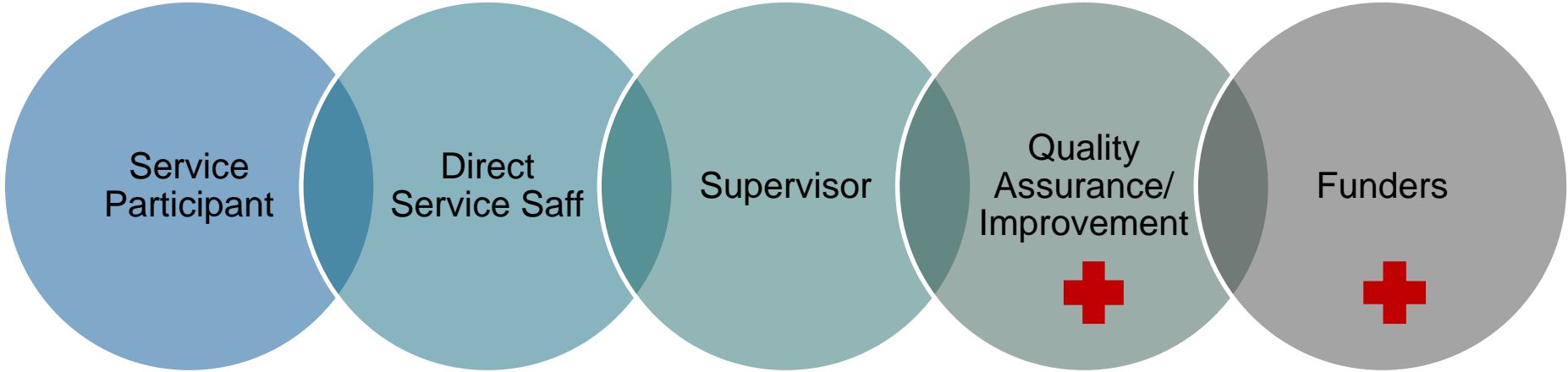
# Important Documentation Considerations for Quality Review

- Current state of client charts
- Location and security of client charts
- Defining medical appropriateness
- Golden thread
- Review forms for needed revisions
  - Agency intake/assessment
  - Individualized service plans
  - Progress note templates
  - Quality Review forms and tools

OHA may have some specific requirements that are not yet clear. These are general health care best practices.



# Who is involved in the documentation process?



Notes health care practices that may be new to some community-based organizations that are new to health sector funding

# Common Medicaid practices in documenting need for services (Medical Appropriateness)



Client needs the service based on assessment



Clear connection of service plan goals to the assessment



Writer must explain the rationale and “tell the story” of why writer’s assistance will be of help



Reader must understand the service rationale



Progress notes are tied to service plan goals



Type and frequency of services is appropriate to interventions and goals

# Technical Elements of a Billable Progress Note

## Required Documentation for HRSN Service Providers

- Date of data entry
- Date the service was provided
- Start and end times with am and pm designation
- Length of service in minutes (required if reimbursement is a unit rate)
- Description of service provided



# Writing the Progress Note Narrative

Focus on the service related to the goals

Relate service to needs assessed and Person-Centered Service Plan

Include direct quotes by the individual, but avoid unnecessary “he said” “she said”

Focus on the facts of what happened, avoid being too subjective or opinionated

Demonstrate “sufficient duration to accomplish the intent/goal”

Include client’s response, progress and plan for next steps



# Common Policies and Procedures

# Policies

- “A policy is a guiding principle used to set direction in an organization.”  
Bizmanuals.com
- Policies are your strategies, your principles, your rules. You may choose to cite the funder, principle or regulation that your agency is complying with that governs the policy within the policy text.



# Procedures



“A procedure is a series of steps to be followed as a consistent and repetitive approach to accomplish an end result.” *Bizmanuals.com*

Your procedures are about your process.

Procedures will be specific to YOUR agency, staff roles, and how your actions and processes supports policies. Procedures may need to be revised more regularly than policies to improve customer service and better support staff workflows.

Workflows are summarized in procedures.

# Office of the Inspector General Compliance Program Guidance, US Department of Health & Human Services

To learn more, visit: <http://oig.hhs.gov/compliance/provider-compliance-training/files/Compliance101tips508.pdf>



Seven elements of effective compliance programs:

- Compliance Officer
- Internal Monitoring and Audits
- **Written Standards and Policies**
- Training and Education Programs
- Open Lines of Communication
- Respond to Detected Problems
- Disciplinary Standards

# Written Policies and Procedures



Written policies (standards of conduct) and procedures (steps to accomplish the policy) may cover topics such as:

- Health records- contents and storage
- Documentation standards
- Cultural competence and humility expectations
- Non-discrimination policy
- Client rights
- Client consent/release of information policies and procedures
- Safety and risk management
- Tracking, reporting and investigating critical incidents

# The CMS 1500 form

You have to capture most of this information, so let's use this as our foundation

[Health Insurance Claim form \(cms.gov\)](https://www.cms.gov)

A sample of a CMS 1500 Health Insurance Claim Form. The form is a complex grid with various fields for patient information, insurance details, and medical services. A large, semi-transparent 'SAMPLE' watermark is overlaid diagonally across the center of the form. The form includes a QR code in the top left corner and a header section with the text 'HEALTH INSURANCE CLAIM FORM'.

## What data might be new to you?

- 1a- Insured's ID # - this is the member's OHP number
- 17A- NPI is the National Provider Identifier
- 21 Diagnosis – found on the HRSN Request Form
- 23 Prior Authorization Number – from Health Share or from Health Plan
- 24B- Place of Service
- 24D- Procedure Codes - Procedures codes will be listed in fee schedule
- 24J- Rendering Provider ID - Your agency's Medicaid number





# Outstanding questions



**WHO DO PROVIDERS SUBMIT  
INVOICES TO?**



**VIA WHAT PLATFORM**



**WHAT IS THE PROCESS FOR THE  
RECEIVING PARTY TO  
COMMUNICATE ANY ISSUES  
WITH INVOICES THAT CAN BE  
CORRECTED? (RA PROCESS, 835  
FILES ETC)**

## HIPAA Privacy and Security

Privacy around disclosing client information and security while maintaining client records





# Invoicing for HRSN Services

See UniteUs slide

# Next Steps: R.E.A.C.H.

## Read

- [OHA on Provider Journey](#)
- [OHA Member Journey](#)
- [HRSN Partners Waiver Work Session – April 4, 2024 \(youtube.com\)](#)

## Explore

- [Health Share of Oregon | HRSN Benefits \(healthshareoregon.org\)](#)

## Attend

- Group TA on this topic or others as needed – May 8th

## Complete

- Course Evaluation (Link is on next slide)
- CCBF Application ([Linked Here](#))

## Have Ready

- What questions do you have before CCBF application submission?

# Health Share of Oregon

The screenshot shows the top navigation bar with the 'health share' logo, a search bar, and links for 'ENGLISH', 'CONTACT US', and 'LOG IN'. Below the navigation is a menu with 'MEMBERS', 'PROVIDERS', 'COMMUNITY PARTNERS', 'HEALTH EQUITY', and 'ABOUT US'. The main content area features a blue banner for 'CCBF Technical Assistance' with 'QUICK LINKS' to 'Technical Assistance Registration form' and 'Training and Technical Assistance Opportunities'. The banner also includes illustrations of a toothbrush, a dental mirror, and band-aids.

## Guidance through the application process

Technical Assistance (TA) will be made available for all interested CCBF applicants during the application submission window. There will be a series of webinars, group TA based on webinar topics and opportunities for organizations to request one-on-one technical assistance based on their specific needs.

Please register at the link below and indicate your organization's needs and desired date/time options:  
[HRSN Capacity Building for Community Based Organizations.](#)

All training materials will be linked here:  
[Health Share of Oregon | CCBF Technical Assistance \(healthshareoregon.org\)](https://healthshareoregon.org/CCBF-Technical-Assistance)

# Feedback Survey:

<https://forms.office.com/r/7GjQuv8vJF>

The graphic has a dark blue background with geometric shapes. It contains the text 'Evaluation Form HRSN CCBF for CBOs' and a large QR code in a white rounded square.

A stylized illustration of several hands in various colors (red, blue, green, yellow, orange) holding a globe. The hands are rendered in a simple, bold, cartoonish style with thick outlines. The globe is light blue and white, representing the Earth. The background is a mix of light blue and orange.

# Thank you!

[csh.org](https://csh.org)