

Qualifying for Oregon Health Plan housing benefits

About Oregon Health Plan housing benefits

Oregon Health Plan (OHP) health-related social needs benefits

OHP offers members health-related social needs (HRSN) benefits. Health-related social needs are basic needs that affect a person's health. HRSN benefits help members who qualify with these basic needs:

- Housing
- Nutrition
- Staying healthy in any weather or climate condition
- Help getting other benefits

What are the HRSN housing benefits?

- Help with rent payments
- Tenant support (help getting resources and services for renters)
- Help with utility set up and payments
- Storage fees
- Home changes for health and safety
- Hotel stays during work on home changes (if needed)

Who qualifies for HRSN housing benefits?

Each benefit has different requirements. **But you must be an Oregon Health Plan member** to qualify for HRSN housing benefits.

This guide gives an overview of how to qualify

The tables on the following pages show what's needed to qualify for each benefit.

NOTE: The tables give a general idea of eligibility. But they aren't a guarantee. OHP needs to review each application to make sure eligibility requirements are legally met.

See Oregon Administrative Rules (OAR) 410-120-0000 through 410-120-2030 for details about this benefit.

How to apply

Members need to work with their health care provider or a local OHP community partner to see if they qualify and apply.

NOTE: HRSN housing benefit applications may take up to two weeks to be reviewed. If approved, additional time may be needed to provide the benefit.

Coordinated care organizations (CCOs) manage Oregon Health Plan benefits for most members. If you don't know if you're in a CCO, call OHP Client Services at 1-800-273-0557 or email Ask.OHP@odhsoha.oregon.gov.

If you're in a CCO

• Go to the CCO web page to see how to contact your CCO.

If you're not in a CCO

 Speak with a care coordinator at 888-834-4304 or email ORHRSN@Acentra.com.

To contact an OHP community partner

 OHP community partners are trained and certified to help members understand and apply for benefits. Their services are free. Visit the <u>Find Local Help</u> page on OHA's website for connect with one.

Fill in an HRSN request form

 Members also can complete an <u>HRSN housing request form</u> online. It's available in many languages. NOTE: Completing the form doesn't guarantee that you'll qualify.

For more information

- Visit the <u>HRSN housing web page</u> to find more information on housing supports and other HRSN benefits.
- Email us at 1115Waiver.Renewal@odhsoha.oregon.gov.

Benefits: Help with rent payments and tenant support

Rent payments and tenant support are two separate benefits but have the same requirements. Members who qualify can apply for one or both if needed.

NOTE: The approval timeline might not meet the need of members who urgently need help with rent (for example, an eviction notice). HRSN housing benefit applications may take up to two weeks to be reviewed. If approved, additional time may be needed to provide the benefit.

Benefit details	Income	Health condition	Living situation		
Rent payments for a total of 6 months, including back payments Tenant support includes help getting resources or services for renters. Things like: Speaking with the person or	Income Must have: Household income is 30% or less of the average yearly income where you live AND lack resources or support to prevent homelessness	Must have at least 1 of these: Complex physical health condition Complex behavioral health condition Developmental or intellectual disability Difficulty with	Living situation All of these are required: • You must have rental housing • You need support staying housed • You have a lease or written rental agreement		
the person or company you're renting from (landlord) • Understanding leases		re	self-care ar daily activiti Experiencir	self-care and daily activities Experiencing abuse or neglect	
Referrals to other housing services like where to find healthcare, legal support, or		 Under age 6 Pregnant or gave birth in the past 12 months Repeated use of emergency room 			
applying for disability or social security		or crisis services			

- Go to page 8, "Household Incomes", to see what incomes qualify.
- Go to page 11 for a detailed description of each medical condition.

Benefits: Utility payments and storage fees

Utility payments and storage fees are two separate benefits but have the same requirements. Members who qualify can apply for one or both if needed.

Benefit details	Income	Health condition	Living situation
Utility payments include one-time setup costs and current and back payments for a total of 6 months Storage fees for a total of 6 months	Must have: • Household income is 30% or less of the average yearly income where you live AND lack resources or support to prevent homelessness	Must have at least 1 of these: Complex physical health condition Complex behavioral health condition Developmental or intellectual disability Difficulty with self-care and daily activities Experiencing abuse or neglect 65 or older Under age 6 Pregnant or gave birth in the past 12 months Repeated use of emergency room or crisis services	All of these are required: • You must be getting the HRSN help with rent payments benefit • You must have rental housing • You need support staying housed • You have a lease or written rental agreement

- Go to page 8, "Household Incomes", to see what incomes qualify.
- Go to page 11 for a detailed description of each medical condition.

Benefit: Home changes for health and safety

There is no income requirement for this benefit.

Benefit details	Health condition	Living situation
Home changes included in this benefit:	Must have at least 1 of these:	Must have housing – either rent or own
 Ramps Grip bars Door or cabinet handles Getting rid of pests Deep cleaning Installing washable curtains or synthetic window blinds to help with allergies 	 these: Complex physical health condition Complex behavioral health condition Developmental or intellectual disability Difficulty with self-care and daily activities Experiencing abuse or neglect 65 or older Under age 6 Pregnant or gave birth in the past 12 months Repeated use of emergency room or crisis services 	either rent or own And at least 1 of these is required: • Leaving incarceration (jail, detention, etc.) • Leaving a mental health or substance use recovery facility • In the Oregon child welfare system (foster care) now or in the past • Going from Medicaidonly benefits to qualifying for Medicaid plus Medicare • Have a household income that's 30% or less of the average yearly income where you live AND lack resources or support to prevent homelessness • Starting in 2025, young adults with special health care needs will also qualify

• Go to page 11 for a detailed description of each medical condition.

Benefit: Hotel stays

To qualify members must have all of the following:

- Be receiving the HRSN home changes benefit
- Need a place to stay during the work on the HRSN home change
- Household income is 30% or less of the average yearly income where you live
 AND lack resources or support to prevent homelessness

Go to page 8, "Household Incomes", to see what incomes qualify. Go to page 11 for a detailed description of each medical condition.

Household incomes that are 30% or less of the average yearly income in Oregon

Use these tables to see if your income qualifies for certain HRSN benefits. The tables show annual totals. Members only need to provide income amounts for the most recent past two months when applying.

How to use the income tables

- 1. Find the column with the number of people living in the household.
- 2. Find the row with the nearest city or county where the household is located.
- 3. Look across the row to find the maximum income for the household size.

How to know your household size

Use the table below to add up everyone in your household. Your household includes you, your spouse, children, and anyone you list on your tax return (if you file taxes). You don't need to file taxes to qualify.

You (the person applying)	1
Your legal spouse	
Your live-in partner if you have a child (under age 19) together	
Children (under age 19) who live with you	
Anyone else you include on your federal income tax return, even if they don't live with you	
If you are under 19, include your parents, step-parents and any brothers or sisters (under age 19) who live with you	
If someone is pregnant in your household, count them and each expected baby	
Total	

NOTE: The household size table can give you an estimate of how OHP defines household size. OHP or your CCO will need to review your application to make sure you meet all legal requirements.

Income tables If your city or county isn't listed, use the nearest city or county.

	30% of the average yearly income by household size - 2024							024
City (metropolitan area) or county	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person
Albany	\$17,850	\$20,400	\$22,950	\$25,450	\$27,500	\$29,550	\$31,600	\$33,600
Bend-Redmond	\$22,000	\$25,150	\$28,300	\$31,400	\$33,950	\$36,450	\$38,950	\$41,450
Corvallis	\$22,700	\$25,950	\$29,200	\$32,400	\$35,000	\$37,600	\$40,200	\$42,800
Eugene-Springfield	\$18,750	\$21,400	\$24,100	\$26,750	\$28,900	\$31,050	\$33,200	\$35,350
Grants Pass	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050
Medford	\$18,450	\$21,100	\$23,750	\$26,350	\$28,500	\$30,600	\$32,700	\$34,800
Portland-Vancouver- Hillsboro	\$24,800	\$28,350	\$31,900	\$35,400	\$38,250	\$41,100	\$4,3900	\$46,750
Salem	\$19,200	\$21,950	\$24,700	\$27,400	\$29,600	\$31,800	\$34,000	\$36,200
Baker County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050
Clatsop County	\$19,400	\$22,200	\$24,950	\$27,700	\$29,950	\$32,150	\$34,350	\$36,600
Coos County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050
Crook County	\$17,600	\$20,100	\$22,600	\$25,100	\$27,150	\$29,150	\$31,150	\$33,150
Curry County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050
Douglas County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050
Gilliam County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050

	30%	30% of the average yearly income by household size - 2024							
City (metropolitan area) or county	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person	
Grant County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050	
Harney County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050	
Hood River County	\$20,550	\$23,500	\$26,450	\$29,350	\$31,700	\$34,050	\$36,400	\$38,750	
Jefferson County	\$17,050	\$19,450	\$21,900	\$24,300	\$26,250	\$28,200	\$30,150	\$32,100	
Klamath County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050	
Lake County	\$17,000	\$19,400	\$21,850	\$2,4250	\$26,200	\$28,150	\$30,100	\$32,050	
Lincoln County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050	
Malheur County	\$17,000	\$19,400	\$21,850	\$24,250	\$26,200	\$28,150	\$30,100	\$32,050	

Qualifying medical conditions

To qualify for HRSN housing benefits, members must have at least one of the qualifying conditions listed below.

Complex physical health condition

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

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.

65 or older

Being 65 years old or older.

Under age six

• Being a child under age 6.

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 <u>Oregon Administrative Rule (OAR) 411-320-0080</u>
 - 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

Being a young adult with special health care needs

- Being a young adult with special health care needs (YSHCN) with the following clinical risk factors:
 - A physical health condition that requires regular health care
 - A mental health condition or substance use disorder.
 - Intellectual disability or developmental disability
 - Needing or receiving health care services, taking medications regularly, or seeing a therapist.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact Chelsea Egbert at chelsea.egbert@oha.oregon.gov or 503-945-5772 (voice and text). We accept all relay calls.

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https://www.oregon.gov/oha/hsd/medicaid-policy/pages/hrsn.aspx