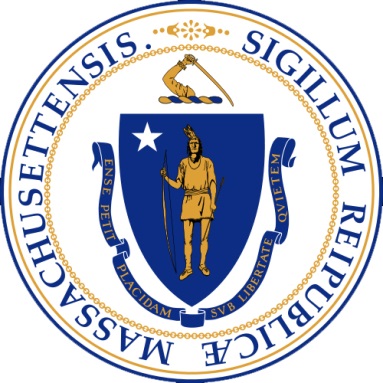
**Commonwealth of Massachusetts**

**Executive Office of Health and Human Services**



Health Related Social Needs (HRSN) Service Manual –   
HRSN Supplemental Housing Services

**Last revised on: July 25, 2025**

Change Log

|  |  |  |
| --- | --- | --- |
| **Version** | **Date** | **Revision Details** |
| 1.0 | July 2024 | * First release. |
| 2.0 | October 2024 | * Restructured how content is presented * Updated the criteria for each Housing service * Updated provider qualifications for Housing Search, Housing Navigation, and Healthy Homes services * Removed the Home Modifications service |
| 2.1 | July 2025 | * Clarified that Z-codes must be the primary diagnosis code on claims for HRSN Supplemental Services. * Removed outdated attachments. * Updated the cadence of the required check-ins for Housing Navigation and Housing Search to align with the fee schedule. * Clarified that Healthy Homes may only provide goods and remediation services that the Enrollee’s landlord is not required to provide as a reasonable accommodation. * Clarified that an Enrollee may be considered to have a Lease Violation if they are part of a household in which the Enrollee, or another individual in the household, has received a written lease violation that results in the Enrollee’s housing instability. |

# Introduction

**All content described here is subject to required approvals of the federal Centers for Medicare and Medicaid Services (CMS) and is subject to change.**

**Related Documents:**

* [MassHealth Accountable Care Partnership Plan Contract](https://www.mass.gov/lists/accountable-care-partnership-plan-contracts)
* [MassHealth Primary Care ACO Contract](https://www.mass.gov/lists/primary-care-aco-pcaco-contracts)
* [MassHealth Managed Behavioral Health Vendor Contract](https://www.mass.gov/lists/masshealth-managed-behavioral-health-vendor-contracts)
* [HRSN Service Manual Definitions](https://www.mass.gov/doc/hrsn-supplemental-services-manual-definitions-4/download)
* [HRSN Supplemental Nutrition Service Manual](https://www.mass.gov/doc/hrsn-supplemental-services-manual-nutrition-2/download)

* [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download)

* [HRSN Supplemental Services Criteria Guidance](https://www.mass.gov/doc/hrsn-supplemental-services-criteria-guidance-2/download)

**Supplemental** **Health Related Social Needs (HRSN) Services in this manual include:**

* [HRSN Supplemental Housing Services – Housing Search](#_HRSN_Supplemental_Housing_8)
* [HRSN Supplemental Housing Services – Transitional Goods](#_HRSN_Supplemental_Housing_3)
* [HRSN Supplemental Housing Services – Housing Navigation](#_HRSN_Supplemental_Housing_9)
* [HRSN Supplemental Housing Services – Healthy Homes](#_Services.HRSN_Supplemental_Housing)

# HRSN Supplemental Housing Services

## HRSN Supplemental Housing Services – Housing Search

### Service Description

Providers of Housing Search assist Enrollees experiencing Homelessness to locate, move into, and maintain housing, in accordance with MassHealth Managed Care Entities’ Contracts (MCE Contracts). Housing Search consists of the following.

1. Looking for Housing
   1. Identify housing needs and preferences
   2. Develop and implement a housing search strategy that meets the Enrollee’s identified needs and preferences
   3. Apply for income supports and housing that are aligned with the Enrollee’s identified needs and preferences including completing an assessment in the local Coordinated Entry System
   4. Coordinate viewing of housing options
2. Move-in
   1. Coordinate all portions of securing a housing lease
   2. Identify resources for move-in costs
   3. Identify resources for establishing a home
   4. Secure utilities, including identifying funds for utility deposits and any utility arrearages
   5. Facilitate access to any needed home modifications
3. Housing Stabilization   
   Meet with the Enrollee to:
   1. Ensure that the Enrollee makes timely rent payments (e.g., connect the Enrollee to money management services)
   2. Provide coaching on life skills needed to adjust to community-based housing
   3. Provide education and training on appropriate tenant behaviors
   4. Provide referrals to community-based organizations as needed for ongoing housing stabilization services

### Additional Service Detail

1. The intensity of Housing Search services may vary over the course of service delivery as Enrollees wait for housing opportunities to become available.
2. Providers of Housing Search must do the following.
   1. Maintain an average case load of 1:35;
   2. Check in with the Enrollee at least twice per 30-day period;
   3. Deliver Housing Search on a mobile basis to Enrollees in any setting of the Enrollee’s choosing that is safe for the Enrollee and staff; and
   4. Meet with the Enrollee in person whenever possible, however, virtual meetings may be used when necessary.
3. Providers of Housing Search must arrange for or directly provide transportation (public or private) for an Enrollee who needs transportation assistance as part of the delivery of Housing Search services

### Criteria for Enrollees to Receive Housing Search

To receive Housing Search, Enrollees must meet the following criteria.

1. HNBC: Have a Health Needs Based Criteria (HNBC);
2. Risk Factor: Be experiencing HUD Category 1 Homelessness at the onset of services;
3. Other Criteria:
   1. Be at least age 55;
   2. Not be receiving housing search services as part of the Emergency Assistance or HomeBase programs operated by the Executive Office of Housing and Livable Communities; and
   3. Either:
      1. Not be eligible for Specialized Community Support Program for Homeless Individuals (CSP-HI); or
      2. Eligible for Specialized CSP-HI but not yet receiving Specialized CSP-HI

### Provider Qualifications

Providers of Housing Search services must meet the following criteria.

1. Have at least two years of experience providing housing search supports to persons experiencing Homelessness. This must include:
   1. Current contracts/grants with local, state, or federal agencies to assist people experiencing Homelessness in locating housing; and
   2. Training on how to determine and document Homelessness status in accordance with [U.S. Department of Housing and Urban Development](https://www.hud.gov/) (HUD) requirements;
2. Have experience providing services in person, on a mobile basis, and virtually;
3. Be an existing documented member (for at least three months) in all of the Continuum of Care (CoC) planning groups within their service area(s) and able to connect an Enrollee to the local CoC Coordinated Entry System; and
4. Have specialized staff with knowledge of housing resources and dynamics of searching for housing such as obtaining and completing housing applications, requesting reasonable accommodations, dealing with housing or credit histories that are poor or lacking, mitigating criminal records, negotiating lease agreements, and identifying resources for move-in costs, furniture, and household goods.

### Payment and Billing Code Requirements

Plans must require their Providers of Housing Search to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The fee schedule rates include activities outlined in Section 2.1.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Housing Services.

## HRSN Supplemental Housing Services – Transitional Goods

### Service Description

Through Transitional Goods, Plans pay for move-in costs (e.g., security deposits, first month’s rent, movers) as well as furnishings and other items necessary to make new housing habitable and comfortable, in accordance with MCE Contracts. [Attachment A](#_ATTACHMENT_B:_Transitional) provides a list of allowable Transitional Goods.

### Additional Service Detail

1. Providers provide move-in supports including arranging for making a payment on the Enrollee’s behalf or providing/arranging for the purchase, delivery, or installation of Transitional Goods. The staff time to complete these tasks is included as part of Specialized CSP-HI services or HRSN Housing Search services and should be billed to the applicable service codes for CSP-HI or HRSN Housing Search, respectively. This staff time should not be billed to applicable service codes for Transitional Goods.
2. Providers of Transitional Goods purchase allowable Transitional Goods on behalf of an Enrollee and keep receipts of all purchases.
3. If an Enrollee is eligible for both Transitional Goods and Kitchen Supplies (an [HRSN Supplemental Nutrition Service](https://www.mass.gov/doc/hrsn-supplemental-services-manual-nutrition-2/download)), Plans must ensure non-duplication of goods provided to the Enrollee.

### Criteria for Enrollees to Receive Transitional Goods

To receive Transitional Goods, Enrollees must meet the following criteria.

1. Other Criteria:
   1. Be moving out of Homelessness into housing; and
   2. Be receiving Specialized CSP-HI services or HRSN Housing Search services.

### Provider Qualifications

Providers of Transitional Goods must meet the following criteria.

1. Be Specialized CSP-HI providers (in accordance with [130 CMR 461.000](https://www.mass.gov/regulations/130-CMR-461000-community-support-program-services)) for Enrollees receiving Transitional Goods who are also receiving Specialized CSP-HI services; and/or
2. Be HRSN Housing Search providers for Enrollees receiving Transitional Goods who are also receiving HRSN Housing Search services.

### Payment and Billing Code Requirements

Plans must require their Providers of Transitional Goods to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.2.A.

All Place of Service codes are allowable for HRSN Supplemental Housing Services.

## HRSN Supplemental Housing Services – Housing Navigation

### Service Description

Providers of Housing Navigation assist Enrollees experiencing housing instability to access benefits, negotiate with landlords, seek legal assistance, apply for new housing (if needed), or take other actions in order to help stabilize an Enrollee’s housing situation, in accordance with MCE Contracts. Specifically, Housing Navigation shall include one or more of the following activities, depending on the needs of the Enrollee to stabilize their housing situation.

1. Application Assistance
   1. Help Enrollees fill out applications, collect necessary application paperwork and secure any needed documents (e.g., photo ID, birth certificate, social security card), including providing funding needed to obtain these items
   2. Help submit applications for resources necessary to increase income and stabilize housing such as those below:
      1. Helping Enrollees develop a system for organizing, tracking, and following up on the status of applications, including applications for:
         1. Income supports and financial assistance
         2. Tax deferral/discount programs
         3. Discount utility programs
         4. Funding for payments to address rent/mortgage arrears
         5. Housing – subsidized and market rate including enrollment in the local Continuum of Care’s Coordinated Entry System
2. Mediation and negotiations to sustain a tenancy such as those below:
   1. Mediate with the landlord (or landlord’s designee)
   2. Assist in submitting a request for a reasonable accommodation
   3. Establish a payment plan with the landlord (or landlord’s designee) or bank
3. Information and referrals
   1. Provide information and referrals to resources in the community to address identified housing issues, such as referrals to:
      1. Legal assistance (not including legal representation in court)
      2. Local housing quality enforcement agencies
      3. Funding for home improvements
4. In coordination with the Enrollee’s Plan, connecting them to services and supports to assist in maintaining the housing moving forward such as linkages to:
   1. Help the Enrollee to maintain enrollment in MassHealth
   2. Community Partners, behavioral health services, long-term services and supports, or medically necessary services
      1. Services from state agencies such as the Department of Mental Health (DMH), Department of Developmental Disabilities (DDS), MassAbility (MBY), Executive Office of Aging & Independence (AGE), and Executive Office of Veterans Services (EOVS)

In addition to the above services, as needed,Providers of Housing Navigation shall provide assistancewith some of the costs related to an Enrollee needing to access new housing, specifically housing application fees, background checks, and identification documents.

### Additional Service Detail

Providers of Housing Navigation:

1. Must be able to provide all of the services listed in Section 2.3.A;
2. Must maintain an average case load of 1:35;
3. Must check in with the Enrollee at least twice per 30-day period;
4. Must provide assistance on a mobile basis to Enrollees in any setting that is safe for the Enrollee and staff;
5. May provide Housing Navigation via telehealth, as appropriate; and
6. Must arrange for or directly provide transportation (public or private) for an Enrollee who needs transportation assistance as part of the delivery of Housing Navigation services.

### Criteria for Enrollees to Receive Housing Navigation

To receive Housing Navigation, Enrollees must meet the following criteria:

1. HNBC: Have the Health Needs Based Criteria (HNBC) of having repeated incidents of emergency department use (defined as 2 or more visits within six months, or 4 or more visits within a year);
2. Risk Factor: Be experiencing housing instability, as evidenced by having received at least one written Lease Violation;
   1. An Enrollee may be considered to have a Lease Violation if they are part of a household in which the Enrollee, or another individual in the household, has received a written lease violation that results in the Enrollee’s housing instability. This may include an Enrollee who is a minor and whose parent receives a Lease Violation; and
3. Other Criteria: Either not be receiving Specialized Community Support Program Tenancy Preservation Program (CSP-TPP), or eligible for Specialized CSP-TPP but not yet receiving Specialized CSP-TPP.

### Provider Qualifications

Providers of Housing Navigation must meet the following criteria:

1. Have at least two years of history providing Housing Navigation supports to persons experiencing housing instability. This must include current contracts/grants with local, state, or federal agencies to assist people to apply for public benefits, housing, and income maximization resources;
2. Have experience providing services in person, on a mobile basis, and virtually;
3. Be an existing documented member (for at least three months) in all of the Continuum of Care (CoC) planning groups within their service area(s) and able to connect an Enrollee to the local CoC Coordinated Entry System; and;
4. Have specialized staff with knowledge of housing resources and dynamics of housing such as obtaining and completing applications for arrearages programs, housing, income sources; requesting reasonable accommodations; and negotiating with landlords.

### Payment and Billing Code Requirements

Plans must require their Providers of Housing Navigation to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.3.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Housing Services.

## HRSN Supplemental Housing Services – Healthy Homes

### Service Description

Healthy Homes includes goods and remediation services that are proven to improve housing conditions related to health needs and that are not the responsibility of the housing owner/landlord. Specifically, this service includes the purchase of goods and provision of remediation services that eliminate known housing-based health and safety risks to ensure the living environment does not adversely affect an Enrollee’s health and safety, in accordance with MCE Contracts. Providers of Healthy Homes may provide the following:

1. Allowable goods:
   1. Provide or arrange for the purchase, delivery, and installation of allowable goods listed below that do not alter the physical structure of an Enrollee’s housing unit. Allowable Healthy Homes goods include those that improve the air quality of the housing, allow the Enrollee to store and use needed medicine, or allow for improved pest control, specifically:
      1. Air Quality
         1. Air conditioner
         2. Air purifier
         3. Cleaning supplies
         4. Curtains/blinds
         5. De/humidifiers
         6. Fans
         7. Heat Pumps
         8. High Efficiency Particulate Air (HEPA)-filters
         9. HEPA-vacuum
         10. Hypoallergenic mattress and linens
      2. Medical Storage
         1. Refrigerator for medicine
         2. Sharps containers
         3. Trash cans with lids
      3. Pest Control
         1. Household pest eradication products
      4. Trash cans with lids
2. Allowable Remediation Services:
   1. Conduct home environmental risk assessments and provide or arrange for remediation services related to found risks. Remediation services are limited to those that would directly improve the housing conditions with regards to air quality and pest control such as carpet removal, mold remediation, vent cleaning, pest eradication, and chore services (including heavy housecleaning, removal of hazardous debris or direct, and removal of yard waste, etc.)

### Additional Service Detail

1. Under Healthy Homes, Enrollees may receive both goods and remediation services, if appropriate;
2. Providers of Healthy Homes may only provide goods and remediation services that the Enrollee’s landlord is not required to provide as a reasonable accommodation;
3. For remediation services, Providers of Healthy Homes must complete an in-home needs assessment to determine the type and amount of services that each Enrollee needs;
4. Providers of Healthy Homes may choose to provide only goods or both goods and remediation services;
5. Providers of Healthy Homes may conduct an in-home needs assessment without subsequent provision of goods or remediation services.

### Criteria for Enrollees to Receive Healthy Homes

To receive Healthy Homes, Enrollees must meet the following criteria:

1. HNBC: Have one the following HNBC:
   1. A complex physical health need that is a pulmonary condition
   2. A complex physical health need that is a cardiac condition,
   3. A behavioral health need that is a hoarding disorder; and
2. Risk Factor: Be living in Unhealthy Housing or housing that is physically unsafe due to an Enrollee’s disability or medical condition.

### Provider Qualifications

Providers of Healthy Homes must meet the following criteria:

1. Providers of Healthy Homes must have staff with knowledge of principles, methods, and procedures of services included under Healthy Homes (as applicable to the position), or comparable services meant to support an Enrollee’s ability to obtain and sustain residency in an independent community setting
2. Providers of Healthy Homes remediation services must also have staff that have experience conducting in-home environmental risk assessments

### Payment and Billing Code Requirements

Plans must require their Providers of Healthy Homes to submit claims using the codes outlined in the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download) and must configure their payment systems to accept claims submitted using these code and modifier combinations. MassHealth has a fee schedule for this service and requires payments be made in accordance with the [HRSN Supplemental Services Fee Schedule](https://www.mass.gov/doc/hrsn-supplemental-services-fee-schedule-3/download).

For all HRSN Supplemental Services, Plans must require Providers to use the Z-code as the primary diagnosis code.

The rates are inclusive of activities outlined in Section 2.4.A and related administrative costs.

All Place of Service codes are allowable for HRSN Supplemental Housing Services.

# ATTACHMENTS

## ATTACHMENT A: Transitional Goods: Allowable Items

* Air conditioner
* Alarm clock
* Baby necessities (baby bathtub, potty training seats, baby proofing products, etc.)
* Bakeware, measuring cups, mixing bowls
* Bath towels
* Bathroom cup, toothbrush holder, toilet paper holder
* Bathmat
* Bed frame
* Bedroom sets
* Birth certificate/photo identification/social security card fees
* Bookcase/rack/shelving/storage bins
* Bunk beds
* Chairs (recliner, living room, accent chair, kitchen stool, etc.)
* Chest of drawers
* Cleaning equipment (mops, brooms, dustpans, etc.)
* Cleaning fee (one-time)
* Clothes hangers
* Coffee maker
* Cribs/bassinets/baby-changing stations
* Curtains/Drapes
* Cutting board
* Deposits or one-time start-up payments of miscellaneous fees outlined in the lease (pet fees, garage fees, laundry fees, amenities fees, etc.)
* Dining table and chairs
* Dish cloths
* Dishware (glasses, bowls, plates, mugs)
* Emergency medical kit/First aid kit
* Fan
* File cabinet
* Fire extinguisher
* Flatware, utensils, and serving utensils
* Food storage containers/canisters
* Housing application fees and fees related to background checks as part of application
* Housing deposits (i.e., security deposit, first month’s rent, last month’s rent and listing fee equal to no more than one month’s rent)
* Humidifier/Diffuser
* Ironing board/iron
* Knife set
* Lamps (desk, floor, reading, etc.)
* Laundry basket
* Linens (sheet sets, bedding, pillows, comforter, blankets)
* Living room sets
* Mattress/box spring
* Mattress pad, egg crate, or memory foam pad
* Microwave
* Mirror
* Moving costs (packing materials, movers, van rental fees, getting items out of storage, etc.)
* One-month supply of cleaning supplies
* One-month supply of pantry supplies (spices, condiments, etc.)
* One-month supply of toiletries (toothpaste, shampoo, etc.)
* Oven mitts
* Pest control fee (one-time)
* Phone, answering machine
* Phone service deposit
* Place mats/tablecloth
* Pots and pans, colander
* Refrigerator (if not provided by landlord)
* Rugs (area rugs, pads, tape)
* Shower curtain
* Small kitchen appliances (toaster, toaster oven, etc.)
* Small kitchen gadgets (can opener, garlic press, etc.)
* Sofa, sofa bed, or futon
* Space heater
* Tables (bedside table, coffee table, end table, side table, computer table, desk)
* Tool kits/sets
* Utilities
  + Utility set up fees/deposits
  + Combined up to 6 months total comprised of one or more of the following:
    - Unresolved utility arrearages if necessary to set up services in new residence
    - First month coverage of utilities including water, garbage, sewage, recycling, gas, electric, internet, and phone (including land line phone service and cell phone service).
* Vacuum cleaner/Mop/Steam mop
* Wash basin and drying rack
* Wastebasket/trash can
* Window shade

## ATTACHMENT B: Applicable Z Codes for HRSN Housing Services

For reference only, below is an overview of applicable Z codes for different housing situations.

### For Housing Search and Transitional Goods: Housing Situation – Experiencing Homelessness

|  |  |
| --- | --- |
| **ENROLLEE HOUSING SITUATION** | **Z CODES THAT MAY BE APPLICABLE** |
| Homeless, Shelter/Safe Haven | * Z59.01 Sheltered Homelessness |
| Homeless, Unsheltered | * Z59.02 Unsheltered Homelessness |
| Homeless, Transitional Housing | * Z59.01 Sheltered Homelessness |
| Homeless, residing in a hotel or motel paid for by charitable organizations or by federal, State, or local government programs for low-income individuals | * Z59.01 Sheltered Homelessness |

### For Housing Navigation: Housing Situation – Unstable Housing

|  |  |
| --- | --- |
| **ENROLLEE HOUSING SITUATION** | **APPLICABLE Z CODES** |
| Housed, has at least one written Lease Violation | * Z59.811 Housing instability, housed, with risk of homelessness * Z59.2: Discord with neighbors, lodgers and landlord |

### For Healthy Homes: Housing Situation – Residing in Unhealthy Housing

|  |  |
| --- | --- |
| **ENROLLEE HOUSING SITUATION** | **APPLICABLE Z CODES** |
| Housed, living in Unhealthy Housing or housing that is physically unsafe due to an Enrollee’s disability or medical condition | * Z59.10: Inadequate housing, unspecified * Z59.11: Inadequate housing environmental temperature * Z59.12: Inadequate housing utilities * Z59.19: Other inadequate housing |