

Homeless Medical Respite Services (MassHealth ACO-only)

Policy

Beginning April 1, 2025, members enrolled in an ACO may be able to obtain respite services through the MassHealth Homeless Medical Respite Services (HMRS) program.

Mass General Brigham Health Plan reimburses certain contracted providers for covered Homeless Medical Respite Services (HMRS) for Mass General Brigham Health Plan Accountable Care Organization (ACO) members experiencing homelessness.

Definition

HMRS are a standard set of services developed by MassHealth. Each service has certain eligibility criteria (e.g., member eligibility, provider qualifications).

The HMRS Program includes:

- Post-hospital medical respite services for MassHealth members experiencing homelessness who had a recent inpatient hospital admission or hospital emergency department visit for a medical or surgical issue and do not have an appropriate location where they can safely recover.
- Pre-procedure colonoscopy support services for MassHealth members experiencing homelessness who need a safe and private environment to prepare for and recover after a colonoscopy.

Reimbursement

Providers are reimbursed according to the plan's network provider reimbursement or contracted rates. Claims are subject to payment edits that are updated at regular intervals.

HMRS covered services are defined by MassHealth. The manner in which covered services are reimbursed is determined by the Mass General Brigham Health Plan payment policies and by the provider's agreement with Mass General Brigham Health Plan.

Please reference procedure codes from the current CPT, HCPCS Level II, and ICD-10-CM manuals, as recommended by the American Medical Association (AMA), the Centers for Medicare & Medicaid

Provider Payment Guidelines

Services (CMS), and the American Hospital Association. CMS and the AMA revise HIPAA medical codes on a pre-determined basis, including changes to CPT, HCPCS, and ICD-10 codes and definitions.

Please refer to the CMS or CPT guidelines for requisite modifier usage when reporting services. The absence or presence of a modifier may result in differential claim payment or denial.

Mass General Brigham Health Plan reviews claims to determine eligibility for payment. Services considered incidental, mutually exclusive, integral to the primary service rendered, or part of a global allowance, are not eligible for separate reimbursement. Please refer to the [General Coding and Billing Guidelines](#) for more information.

All claims are subject to audit services, and medical records may be requested from the provider.

Reimbursable HMRS Services

HCPCS Code & Modifier	Service Name	Service Description
H0043-UA	Supported housing, per diem	Supported housing, per diem (comprehensive pre-procedure medical respite services, short-term pre-procedure housing)
H0043-UB	Supported housing, per diem	Supported housing, per diem (comprehensive post-hospitalization medical respite services, short-term post-hospitalization housing)
H0043-UC	Supported housing, per diem	Supported housing, per diem (comprehensive post-hospitalization medical respite services medical leave of absence)
H0043-UD	Supported housing, per diem	Supported housing, per diem (comprehensive post hospitalization medical respite services non-medical leave of absence-planned)
H0043-U1	Supported housing, per diem	Supported housing, per diem (comprehensive post hospitalization medical respite services non-medical leave of absence-unplanned)

Provider Payment Guidelines

Required Modifiers for HMRS Services

Homeless Medical Respite (HMRS): Append to HCPCS H0043

Modifier	Descriptor
UA	Medicaid Level of Care: Supported housing, per diem (comprehensive pre-procedure medical respite services, short-term pre-procedure housing)
UB	Medicaid Level of Care: Supported housing, per diem (comprehensive post-hospitalization medical respite services, short-term post-hospitalization)
UC	Medicaid Level of Care: Supported housing, per diem (comprehensive post-hospitalization medical respite services medical leave of absence)
UD	Medicaid Level of Care: Supported housing, per diem (comprehensive post-hospitalization medical respite services non-medical leave of absence-
U1	Medicaid Level of Care: Supported housing, per diem (comprehensive post hospitalization medical respite services non-medical leave of absence-

For MassHealth HMRS-related administrative and billing instructions, please refer to [130 CMR 450.000: Administrative and Billing Regulations | Mass.gov](#).

Related Mass General Brigham Health Plan Payment Guidelines

[General Coding and Billing
Modifiers](#)

References

[Homeless Medical Respite Services](#)
[Homeless Medical Respite Services Manual for MassHealth Providers](#)
[Physician Manual for MassHealth Providers](#)

Publication History

Topic: Homeless Medical Respite Services	Owner: Network Management
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August 1, 2025

Original Documentation

Provider Payment Guidelines

This document is designed for informational purposes only. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization/notification, and utilization management guidelines when applicable, adherence to plan policies and procedures, claims editing logic, and provider contractual agreement. In the event of a conflict between this payment guideline and the provider's agreement, the terms and conditions of the provider's agreement shall prevail. Payment policies are intended to assist providers in obtaining Mass General Brigham Health Plan's payment information. Payment policy determines the rationale by which a submitted claim for service is processed and paid. Payment policy formulation takes into consideration a variety of factors including: the terms of the participating providers' contract(s); scope of benefits included in a given member's benefit plan; clinical rationale, industry-standard procedure code edits, and industry-standard coding conventions.

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc., and Mass General Brigham Health Plan Insurance Company.