



**Housing- Related
Community Supports**
IMPLEMENTATION ADVISORY COMMITTEE

Transitional Rent Eligibility Criteria Explainer

Behavioral Health Population of Focus



Background

California is implementing Transitional Rent beginning in January 2026, complementing existing housing Community Supports. Transitional Rent provides temporary rental assistance to Medi-Cal members experiencing homelessness or housing instability who are working toward longer-term housing solutions. Transitional Rent eligibility is regulated by multiple sections of the Department of Health Care Services (DHCS) Community Supports Policy Guide, Volume 2. This **Transitional Rent Eligibility Criteria Explainer (the Explainer)** was developed to support a shared understanding of eligibility across partners, including Housing Community Supports providers, counties, and Medi-Cal Managed Care Plans (MCPs).

The Explainer focuses on the **Behavioral Health Population of Focus (BH POF)** criteria outlined in the DHCS Community Supports Policy Guide, Volume 2 (p.61), which becomes mandatory for all MCPs beginning January 1, 2026. By translating DHCS policy language into step-by-step decision points, the Explainer can help users determine whether a Medi-Cal member is eligible for Transitional Rent and ready for referral.

How to Use This Explainer

This Explainer is intended for staff use as:

- A **pre-referral and review tool** for providers and referrers
- A **supporting reference** for MCP staff processing authorizations.

It should not replace public-facing documents for Medi-Cal members.

Note: Local implementation may vary. Consult in with local partners as needed.

Steps:

1. Briefly review the **Quick Reference** to see whether the individual is likely eligible.
2. Go back through the Quick Reference and complete any supporting pages **in order**.
3. If the member is eligible, make the referral. If information is unknown or unavailable, submit the referral anyway. MCPs should verify and approve eligibility using all available records.

For Providers and Referrers:

This Explainer can serve as:

- An **onboarding guide** for training front-line staff on Transitional Rent eligibility
- A **Quick Reference (p.2)** to confirm eligibility prior to referral
- A tool for staff who **follow up on referrals** with MCPs to better understand why a Transitional Rent referral was approved or denied.

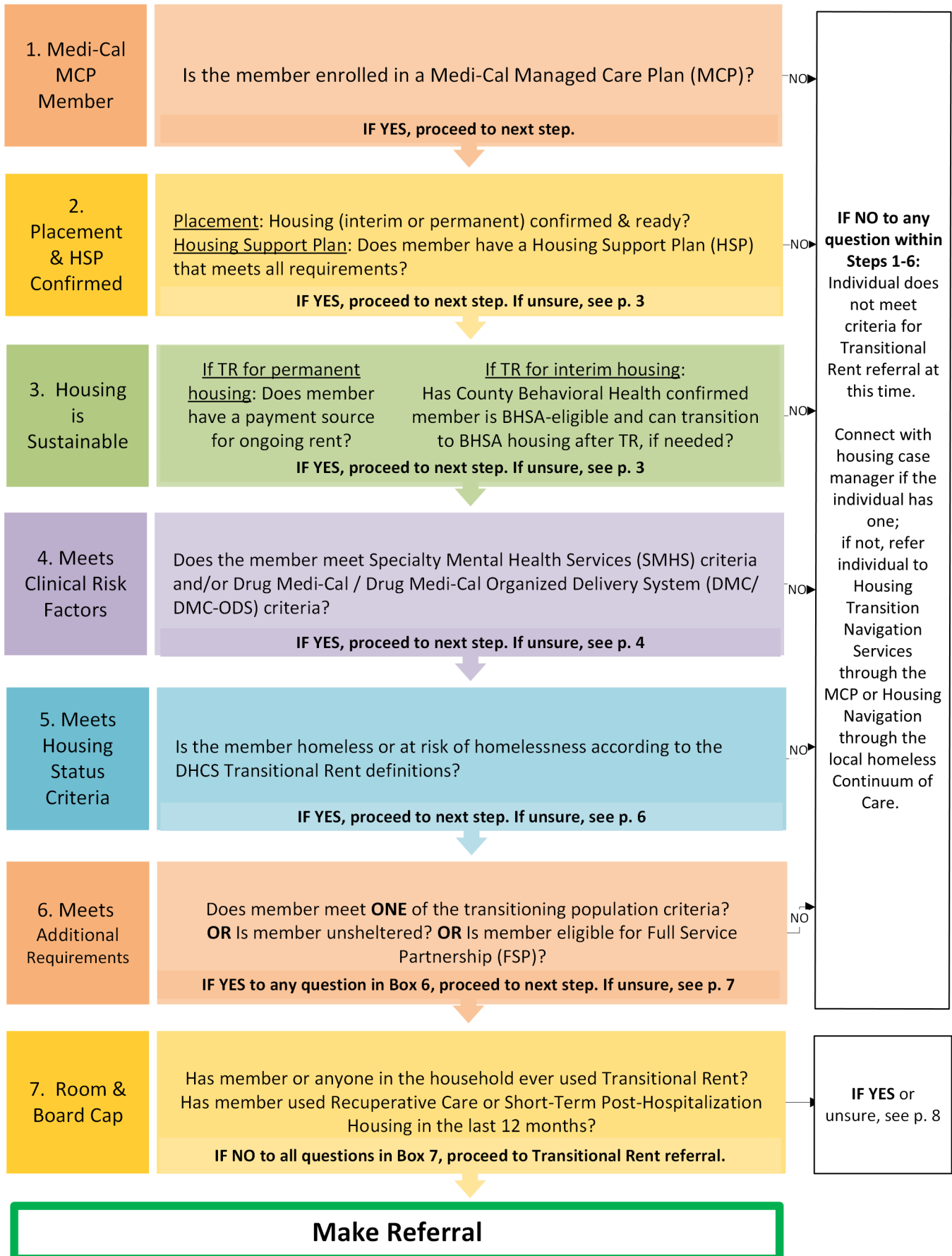
For MCPs:

Utilization Management (UM) staff can use this Explainer to review Transitional Rent authorization requests.

About Us

This Explainer was created by the Housing Community Supports Implementation Advisory Committee. For more information, visit our website: HousingCSTools.org

QUICK REFERENCE: Is individual eligible & ready for referral to Transitional Rent at this time?



BOXES 2 & 3: PLACEMENT, HOUSING SUPPORT PLAN, & HOUSING SUSTAINABILITY

Does the Medi-Cal member meet the following requirements? Review the information below and consult with other providers serving the member as needed.

Box 2a: Placement - Is a housing placement confirmed and ready for the member?

Permanent setting: A setting with a renewable lease agreement of at least one month. If a setting can be either permanent or interim, it is considered permanent when a renewable lease is in place.

Interim setting: Shelters, transitional housing, recuperative care, hotels/motels, or other time-limited placements without a renewable lease.

All Transitional Rent placements must comply with DHCS guidance, including allowable settings, habitability standards, and maximum payment rates. (See [DHCS Community Supports Policy Guide](#), Volume 2, p. 63-64 and [Transitional Rent Payment Methodology](#))

Box 2b: Housing Support Plan (HSP) - Does the member have an HSP that meets all requirements?

HSPs are developed based on the member's housing needs assessment and other information. The HSP includes the following:

- HSP Date (created and/or most recently updated)
- Member Barriers, Goals, & Action Plan
- All Supports Needed to Sustain Permanent Housing
- Member Preferences & Needs

An HSP is required as a condition of authorization for Transitional Rent ([DHCS Community Supports Policy Guide](#), Vol. 2, p. 17). See the [Housing Support Plan Quality Review Tool](#) for more information.

Box 3: Housing is Sustainable - Does the member's HSP have a permanent housing strategy & solution?

Permanent settings: Does the HSP identify the payment source(s) and mechanism(s) that will maintain the member's housing after Transitional Rent ends?

The HSP must document at least one payment source and/or mechanism. Permanent housing solutions should be specific to the member, not hypothetical. Documentation should show confirmed or approved resources, not just potential or pending applications.

Examples may include but are not limited to:

- Federal Housing Choice Vouchers
- State-funded housing programs
- Member income
- Shallow subsidy programs (long-term, partial rent assistance)
- Other confirmed programs or resources

Interim Settings: Has the local county behavioral health department confirmed that the member is BHSA-eligible and can transition to BHSA housing interventions after Transitional Rent, if needed?

Review Full [Permanent Housing Strategy & Solutions Guide \(see p. 14\)](#)

If YES to all 3 requirements above, Go to Box 4 (Clinical Risk Factors).

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BOX 4: CLINICAL RISK FACTORS

Starting January 2026, Transitional Rent eligibility includes the Behavioral Health Population of Focus. This section helps clarify: Does the member meet Specialty Mental Health Services (SMHS) and/or Drug Medi-Cal / Drug Medi-Cal Organized Delivery System (DMC/DMC-ODS) criteria? Review the information below and consult with clinical providers as needed.

| SMHS Criteria (BHIN 26-002, p. 5 and Community Supports Policy Guide, Vol 2, p. 114) | |
|---|---|
| Adults (Age 21+) | Children and Youth (Under Age 21) |
| <p>1. Member has one of the following:</p> <ol style="list-style-type: none"> Significant impairment, where impairment is defined as distress, disability, or dysfunction in social, occupational, or other important activities. A reasonable probability of significant deterioration in an important area of life functioning. | <p>1. High risk for a mental health disorder due to trauma, as evidenced by a screening tool, child welfare involvement, juvenile justice involvement, or experiencing homelessness;</p> <p>OR</p> <p>2. A. Significant impairment <u>or</u> a need for SMHS regardless of presence of impairment; AND</p> <p>B. A diagnosed mental health disorder <u>or</u> a suspected one not yet diagnosed <u>or</u> health conditions stemming from trauma, abuse, or neglect.</p> |
| <p>2. AND The condition from #1 is due to one of the following:</p> <ol style="list-style-type: none"> A diagnosed mental health disorder¹ A suspected mental disorder - not yet diagnosed. | |
| <p>If yes to 1 AND 2 for adults (21+), and yes to 1 OR 2 for youth under age 21, the member meets SMHS criteria. Go to Box 5 (Housing Status Criteria).</p> <p>Examples include, but are not limited to:</p> <ul style="list-style-type: none"> The member has accessed SMHS from County Behavioral Health (BH) or contracted providers within the last 12 months. Any member who is under age 21 who is experiencing homelessness, per BHIN 26-002 p.5. A member who is not connected to County BH services <u>might</u> still meet criteria if the member: <ul style="list-style-type: none"> has received emergency treatment for emotional distress or been admitted to a psychiatric hospital more than once in the past 12 months; OR is having difficulties in important areas of life like school, work, relationships, or housing, because of how they are feeling or due to their mental health; OR has had recent changes or challenges with areas of life such as personal hygiene, sleep, energy level, appetite, weight, sexual activity, concentration, or motivation because of how they are feeling or due to their mental health; OR has had recent suicidal thoughts or self-harming behavior (e.g. cutting, hurting themselves); OR (ONLY for members under age 21): has experienced trauma due to criminal justice involvement, child welfare involvement, or other traumatic events; OR has other significant impairments related to mental health. <p><i>Notes: SMHS criteria are complex; usually, a behavioral health professional must assess the member. The DHCS Mental Health Level of Care Screening Tool can help determine if a member would qualify for SMHS. There are two tools, one for adults (Adult Screening Tool) and one for youth (Youth Screening Tool). If you suspect that the member meets SMHS criteria but aren't sure, make the referral to the MCP if all other criteria are met. Include information about the member's mental health needs in the referral; the MCP may request more information.</i></p> | |

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¹ According to criteria of current edition of the Diagnostic and Statistical Manual (DSM) of Mental Disorders and the International Statistical Classification of Diseases and Related Health Problems.

DMC / DMC-ODS Criteria ([Community Supports Policy Guide, Vol 2, p. 115](#))

3. The member has “at least one diagnosis from DSM for Substance-Related and Addictive Disorders, with the exception of Tobacco-Related Disorders and Non-Substance-Related Disorders.”

4. Member has had “at least one diagnosis from the DSM for Substance Related and Addictive Disorders, with the exception of Tobacco Related Disorders and Non-Substance-Related Disorders, prior to being incarcerated or during incarceration, determined by substance use history.”

Note: The main difference between #3 and #4 is that the member may have received their SUD diagnosis and/or been actively using substances before incarceration but may not have used substances during incarceration. Therefore, the relevant time period is the 12 months before incarceration, instead of the most recent 12 months.

5. Members under 21 only: “Meets the medical necessity standards for one or more SUD services provided through the Drug Medi-Cal or Drug Medi-Cal Organized Delivery System delivery systems, as recommended by a licensed behavioral health provider.”

Note: The main difference for #5 is that, while the DSM criteria for SUD usually require at least 12 months of substance use behavior for a diagnosis, this may not be appropriate for youth due to their age. Youth may also qualify for early intervention services that are different from those that are available to adults.

If yes to **either #3 or #4 or #5** above, the member meets DMC / DMC-ODS criteria. Go to **Box 5 (Housing Status Criteria)**.

Examples include, but are not limited to:

- The member has been diagnosed with alcohol use disorder, opiate use disorder, stimulant use disorder, or another SUD (not tobacco) within the last 12 months.
- The member has accessed SUD treatment within the last 12 months.
- The member was incarcerated within the last 12 months and self-reports behaviors consistent with substance use disorder in the 12 months prior to incarceration (even if not within the last 12 months).
- The member has accessed SUD treatment while incarcerated within the last 12 months.
- Members under 21 only: The member has received a recommendation to access SUD treatment from a licensed behavioral health clinician within the last 12 months.

Notes:

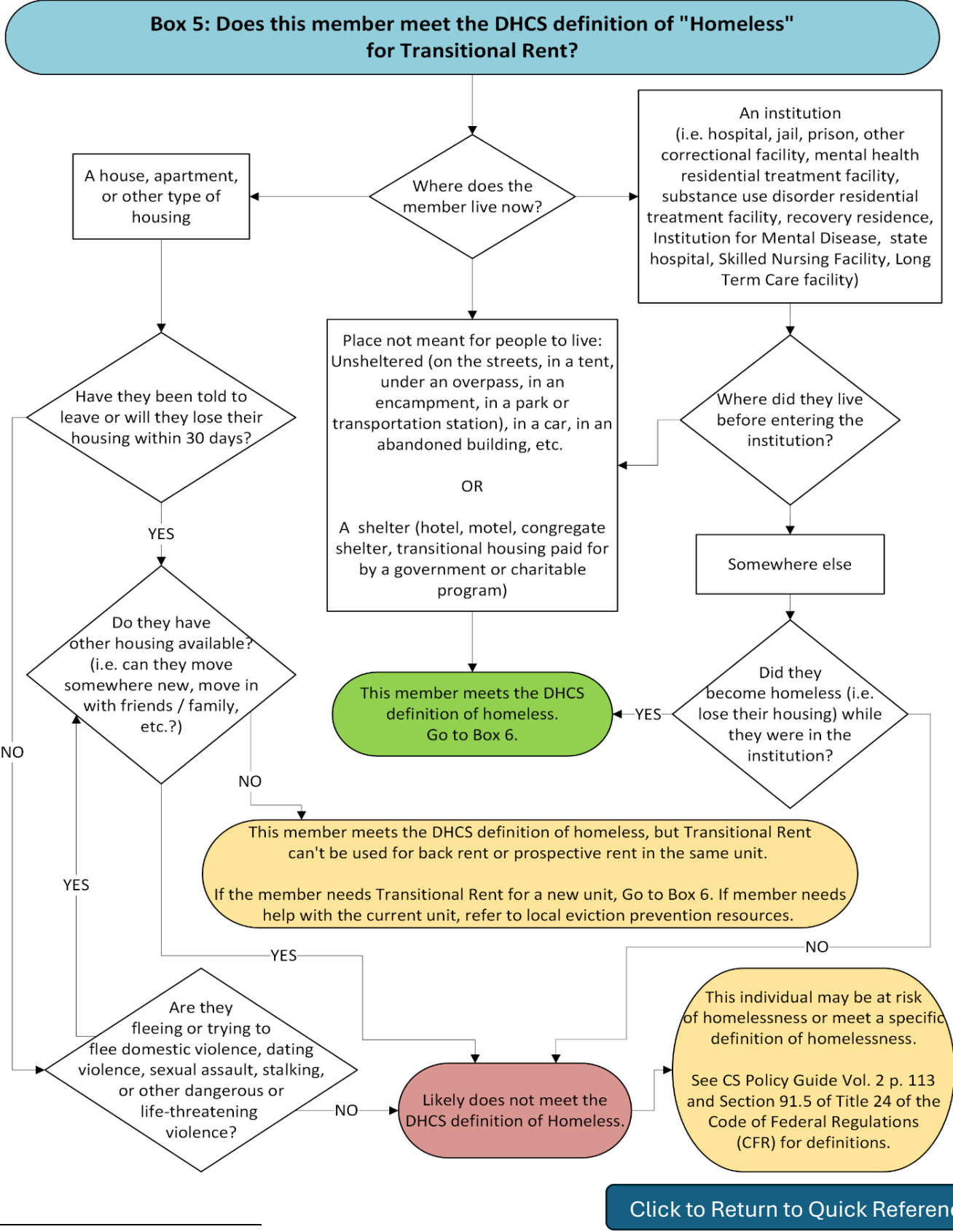
- *The member may be diagnosed with SUD by any qualified clinical provider (a.k.a. licensed practitioner of the healing arts), including primary care, hospital clinicians, street medicine, licensed clinical social workers, behavioral health providers, or others. The diagnosis does NOT need to be made by a County Behavioral Health department or SUD service provider.*
- *If you suspect that the member has an SUD but aren't sure if the member has a formal diagnosis, make the referral to the MCP as long as other criteria are met. Include information about the suspected SUD as part of the referral; the MCP may request more information if needed.*
- *The SUD criteria for Transitional Rent eligibility are different from those for [BHSA](#). For BHSA, the member must have a “moderate or severe” substance use disorder; for Transitional Rent, **any** level of SUD counts.*
- *You may need the member to sign an authorization to share information with the MCP if 42 CFR part 2 applies (such as data from formal SUD treatment programs). However, SUD diagnoses from other health providers (e.g. primary care, ER/inpatient visits, street medicine) are not usually subject to those higher standards. See [State Health Information Guidance](#) for more information.*
- *Members under 18 can sign an authorization to share information regarding their SUD services on their own behalf; parent/guardian consent is not required.²*

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² CA law does not require parental consent to treatment. If a member is under 18 and acts alone seeking treatment, only they are authorized to give consent for disclosure of their identifying information. See [42 CFR § 2.14](#) (2026) for more detail.

BOX 5: HOUSING STATUS CRITERIA

Is the member homeless or at risk of homelessness³, as defined by DHCS? Follow the chart below to determine whether a member meets the housing status criteria for Transitional Rent:



³ Members who are housed but at risk of homelessness cannot use Transitional Rent to cover rental costs for their current home. This is because, “at this time, Transitional Rent may not be used to cover eviction prevention—i.e., rental arrears (back rent) or prospective rental assistance for individuals who are housed but at risk of homelessness” (DHCS Community Supports Policy Guide, Vol. 2, p. 63).

BOX 6: ADDITIONAL REQUIREMENTS

Does the Medi-Cal member meet **at least one** of the following requirements? Review the information below and consult with other providers serving the member as needed.

| Does the Medi-Cal Member meet at least one of the following requirements? (Community Supports Policy Guide, Vol 2, p. 58) |
|---|
| 1. Transitioning out of an institutional or congregate residential setting within the past 6 months “Individuals transitioning out of an institutional or congregate residential setting, including but not limited to an inpatient hospital stay, an inpatient or residential substance use disorder treatment facility, an inpatient or residential mental health facility, or nursing facility.” |
| 2. Transitioning out of a carceral setting within the past 6 months “Individuals transitioning out of a state prison, county jail, youth correctional facility or other state, local or federal penal setting where they have been in custody and held involuntarily through operation of law enforcement authorities.” |
| 3. Transitioning out of interim housing within the past 6 months “Individuals transitioning out of transitional housing, rapid rehousing, a domestic violence shelter or domestic violence housing, a homeless shelter, or other interim housing, whether funded or administered by HUD, or at the State or local level.” |
| 4. Transitioning out of recuperative care or short-term post-hospitalization housing within the past 6 months “Individuals transitioning out of short-term post-hospitalization housing or recuperative care, whether the stay was covered by Medi-Cal managed care, or another source.” |
| 5. Transitioning out of foster care “Individuals having aged out of foster care up to age 26 (having been in foster care on or after their 18th birthday) either in California or in another state.” |
| 6. Experiencing unsheltered homelessness “Individuals or families with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground.” |
| 7. Eligible for Full-Service Partnership (FSP) FSP is a comprehensive behavioral health program for individuals living with significant mental health and/or co-occurring substance use conditions that have demonstrated a need for intensive wraparound services. In practice, most people who meet clinical risk factors and housing status criteria will also be eligible for FSP. For full FSP eligibility criteria, see DHCS Community Supports Policy Guide, Vol. 2 , p. 116, April 2025 and W&I code 5891.5(c) . |
| If yes to at least ONE of the above (#1-7), the member meets Additional Requirements for Transitional Rent. Go to Box 7 (Room and Board Cap) . |

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Box 7: Room and Board Cap

Transitional Rent can provide up to six months (182 days) of rental assistance and rent and housing fees per household, per demonstration period (i.e. through December 2029). The six months of Transitional Rent do not have to be continuous.

Transitional Rent is also subject to the six-month global cap on Room and Board services within a rolling 12-month period. This means a member may not receive more than a combined six months (182 days) of Short-Term Post-Hospitalization Housing, Recuperative Care, and Transitional Rent during any rolling 12-month period. ([Community Supports Policy Guide, Vol. 2](#), p.13)

| Previous Room and Board Community Supports Service Use | # of Days |
|--|-----------|
| 1. Has the member or anyone in their household ever used Transitional Rent? If yes, how many days did they use Transitional Rent? If no or unknown, enter 0. | |
| 2. Has the member used Recuperative Care and/or Short-Term Post-Hospitalization Housing in the last 12 months (counting backwards from the proposed Transitional Rent end date)? If yes, how many days did they use? If no or unknown, enter 0. | |
| Calculate how many days the member has available for Transitional Rent: | |
| <p>182 - (number from Question 1) - (number from Question 2) = Number of days available for Transitional Rent</p> <p><i>Example: If the member has never used Transitional Rent before, the answer to Question 1 would be 0. If the member used 14 days of Recuperative Care and 0 days of Short-Term Post-Hospitalization Housing in the last 12 months, the answer to Question 2 would be 14.</i></p> <p>Example Calculation: 182 - 0 - 14 = 168 days available for Transitional Rent</p> | |
| Next Steps | |
| <ul style="list-style-type: none">• If the number of days available for Transitional Rent at this time is 1 or more days, the member is eligible for Transitional Rent. Make a referral.• If the number of days available for Transitional Rent at this time is 0 or a negative number of days, the member is not eligible for Transitional Rent at this time. <p>Note: MCPs may have additional information about previous room and board Community Supports use. If days are unknown, you should still submit a referral to the MCP. MCP will verify available days based on available records.</p> | |

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GLOSSARY

| Acronym | Definition |
|-------------|---|
| BH | Behavioral Health |
| BHSA | Behavioral Health Services Act |
| BHSA HI | Behavioral Health Services Act Housing Interventions |
| CES | Coordinated Entry Systems |
| CoC | Continuum of Care |
| CS | Community Supports |
| DHCS | (CA) Department of Health Care Services |
| DMC/DMC-ODS | Drug Medi-Cal/Drug Medi-Cal Organized Delivery System |
| FSP | Full-Service Partnership |
| HMIS | Homeless Management Information System |
| HSP | Housing Support Plan |
| IH | Interim Housing |
| MCP | Medi-Cal Managed Care Plan |
| PH | Permanent Housing |
| PSH | Permanent Supportive Housing |
| SMI | Serious Mental Illness |
| SMHS | Specialty Mental Health Services |
| SUD | Substance Use Disorder |
| TR | Transitional Rent |

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REFERENCES

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