

Transitional Rent provider access guide

Some Medi-Cal Members with behavioral health needs may be eligible for Transitional Rent, a new Medi-Cal Community Support that may cover up to six months of rent payments. This guide provides an overview of the Community Supports benefit, including Member eligibility criteria and the key steps providers must take prior to referring a Member to Molina Healthcare of California (Molina).

What is Transitional Rent?

Transitional Rent is Medi-Cal's newest Community Support and provides temporary rental assistance to eligible Members who are experiencing or at risk of homelessness and meet applicable DHCS eligibility criteria. Transitional Rent may be authorized for up to six months, subject to DHCS' 182-day room-and-board global cap and Molina authorization requirements.

Transitional Rent may include assistance with:

- Locating and securing appropriate housing units
- Confirming the unit meets basic habitability requirements
- Supporting Members in reviewing and signing a lease
- Coordinating rental payments directly to landlords
- Collaborating with service providers that support housing stability
- Transitional Rent will cover eligible rental costs in a permanent or approved interim housing setting, including rent and certain housing-related charges that are part of the rent obligation, such as required storage fees, amenities, or landlord-paid utilities, when allowable under DHCS guidance and Molina requirements.

Transitional Rent is intended to support a housing transition and must be tied to a documented plan for housing stability.

Beginning January 1, 2026, Medi-Cal managed care plans are required to cover Transitional Rent for Members who fall within the Behavioral Health (BH) population of focus (POF). Additional populations may be included in future phases, as determined by the Department of Health Care Services (DHCS).

What is required before requesting Transitional Rent?

Before submitting a Transitional Rent request to Molina, the referring entity must confirm that the Member appears to meet current DHCS eligibility requirements for Transitional Rent and that a Housing Support Plan (HSP/IHSP) is in place or substantially developed and sufficient to support preliminary eligibility review. Final authorization may require additional documentation and sustainability planning. The Housing Support Plan must describe the Member's housing barriers, the actions needed to secure and maintain housing, the support needed for housing stability, and the plan to sustain housing after Transitional Rent ends.

If Transitional Rent is proposed for an interim housing setting, the request must also include documentation showing the Member has been reviewed for an appropriate longer-term housing pathway and, when applicable, coordination with the county behavioral health agency regarding eligibility for Behavioral Health Services Act (BHSA) housing interventions or another longer-term housing resource.

Once these requirements are met, providers should follow Molina Healthcare of California's established referral and authorization process to submit a Transitional Rent request.



Step 1: Evaluate Member eligibility



Step 2: Develop a housing support plan



Step 3: Submit inquiry or pre-screen to Molina



Step 4: Molina reviews & authorizes Transitional Rent



Step 5: A Transitional Rent Provider is assigned



Step 1: Evaluate eligibility for Transitional Rent

To qualify for Transitional Rent under the BH POF, a Member must be enrolled in Medi-Cal managed care and meet all of the following criteria:



1. Clinical risk factors



2. Homeless status



3. Additional requirements

Criterion 1: Clinical risk factors

To meet the clinical risk factor requirements for the BH POF, a Member must meet access criteria for Specialty Mental Health Services (SMHS), Drug Medi-Cal (DMC), or DMC Organized Delivery System (DMC-ODS).

- **SMHS:** Not all individuals with a mental condition meet access criteria for SMHS.
 - For Medi-Cal Members age 21 and older, access to SMHS requires both of the following:
 - Have a “significant impairment” where impairment is defined as distress, disability or dysfunction in social, occupational, or other important activities or “a reasonable probability of significant deterioration in an important area of life functioning.”
 - Member’s condition is due to either a diagnosed mental health disorder or a suspected mental disorder that has not yet been diagnosed.
 - Members under age 21 may also qualify for SMHS based on significant trauma and a need for SMHS services.
- **DMC/DMC-ODS:** All individuals with a diagnosed substance use disorder (SUD), other than tobacco use disorder, meet the access criteria for DMC or DMC-ODS. Members under age 21 may also qualify based on a need for DMC or DMC-ODS services.

Criterion 2: Homeless status

Member meets the homeless status criterion if they are experiencing or at risk of homelessness, consistent with DHCS and federal homelessness definitions. Members at risk of homelessness must demonstrate a pending loss of housing or another qualifying risk factor consistent with DHCS guidance.

Criterion 3: Additional requirements

In addition to meeting the clinical risk factor criteria and experiencing or being at risk of homelessness, Members must meet one of the following requirements:

- **Unsheltered status:** Living unsheltered, meaning they are in a location not meant for humans to live in, such as on the street, in a park, in a vehicle, or in a shed, garage, or other similar setting.
- **Eligible for Full Service Partnership (FSP):** Meets eligibility criteria for FSP, a comprehensive behavioral health program for individuals living with significant mental health or substance use conditions.
- **Transitioning population:** Includes transitions from Short-Term Post-Hospitalization Housing (STPHH), Recuperative Care, incarceration, foster care, crisis residential settings, and other qualifying institutional or congregate care environments.

Examples of people eligible for the BH POF

The examples below are illustrative only and are intended to support preliminary understanding of the BH POF. Final eligibility and authorization depend on the full facts of the case, applicable DHCS requirements, Molina review, and required supporting documentation.

Examples that may meet BH POF criteria (final Molina review required)	Examples that may not meet BH POF criteria
- Any SMHS client (or person eligible for SMHS) living on the street or in a homeless shelter, couch surfing, or otherwise at risk of homelessness* - A person enrolled in a county FSP program and experiencing or at risk of homelessness* - Any person living on the street or in a homeless shelter who has an SUD (other than tobacco use) - A person reentering the community from a correctional or health care facility who is eligible for SMHS or has an SUD - A person under age 26 who was in foster care on or after their 18th birthday, and is eligible for SMHS or has an SUD	- A person with no mental illness or SUD - A person who has a mental health condition that does not cause significant impairment - A person who is housed and needs support with rental payments in their current apartment

Note: These examples are for general guidance only. A Member may appear to meet criteria at pre-screen and still require additional documentation or clarification before Molina can make a final authorization decision. *For people at risk of homelessness, Transitional Rent may not be used in their current residence.

Step 2: Develop a housing support plan (HSP)

Before Molina can authorize Transitional Rent (TR), a current HSP must be in place. The HSP must describe the Member’s housing barriers, goals, action steps, supports needed to secure and maintain housing, and the plan for sustaining housing after TR ends. The plan should be individualized, trauma-informed, culturally responsive, and developed with Member input whenever possible. Different types of organizations may help a Member develop an HSP, including county Behavioral Health agencies, Behavioral Health professionals, Community Supports providers, or other housing providers.

The housing support plan must:

- Include the date the plan was created or most recently updated;
- Identify the Member’s housing barrier or barriers and the related goals and action steps;
- Identify the supports needed to obtain, transition into, and maintain housing, including services provided through ECM, the Housing Trio, county behavioral health, or other housing resources, as applicable;
- Describe how TR will support the current housing transition;
- Describe how housing will be sustained after TR ends. Identify the anticipated post-TR funding source (BHSA, Housing Choice Voucher, county-funded housing assistance, disability income, employment income, or other sustainability resource).
- Identify the responsible parties for next steps, follow-up actions, and transition planning:
 - If a Member will receive TR in an **interim setting**, the County BH agency must confirm either current eligibility or active consideration for BHSA housing interventions, another housing subsidy pathway, or another documented long-term housing strategy.
 - If a Member will receive TR in a **permanent setting**, the HSP should identify the expected funding source or sustainability strategy after TR, whether that source is confirmed, and what steps remain if confirmation is still pending. Molina may pend or deny authorization if the required post-TR sustainability plan is not adequately documented.

Step 3: Make a referral to Molina for Transitional Rent (TR)

Once a Member appears to meet TR eligibility criteria and a HSP is in place, the referring entity may begin Molina's TR intake process. For Molina, TR requests generally begin as **an inquiry or pre-screen submission** rather than an immediate authorization request. Referring entities should follow Molina's current TR inquiry and pre-screen workflow, including submission of the required pre-screen form and supporting documentation. If the request appears to meet preliminary criteria, Molina will advance the request through the applicable internal review and authorization pathway.

The current Molina TR Pre-Screen Form must be submitted along with supporting documentation. Requests may be delayed if required eligibility or sustainability documentation is missing.

Molina may accept TR inquiries or pre-screen submissions from county behavioral health agencies, health care providers, housing support providers, community-based organizations, Continuums of Care, Members, caregivers, and other referral sources consistent with DHCS "meet members at the door" expectations.

Step 4: Molina authorizes Transitional Rent (TR)

Before authorizing a Member for TR, Molina must:

- Verify that the Member meets current DHCS and Molina eligibility requirements for TR;
- Confirm the Member has available days remaining within 182-day room-and-board global cap applicable across TR, Recuperative Care, and Short-Term Post-Hospitalization Housing;
- Confirm the requested TR period does not duplicate other room-and-board Community Supports for the same dates of service;
- Review the Housing Support Plan and supporting documentation to confirm the request is tied to a qualifying housing transition and includes a post-Transitional Rent housing sustainability plan; and
- Confirm any additional documentation required for the requested setting type, payee arrangement, or county coordination pathway.

In accordance with current Molina TR policy and workflow, Members authorized for TR are also treated as eligible for ECM and the Housing Trio of Community Supports—Housing Transition Navigation Services, Housing Deposits, and Housing Tenancy and Sustaining Services—and Molina will coordinate connection to those services through its applicable authorization, referral, and provider-assignment processes. Eligibility for these services does not eliminate the need for Molina's internal operational steps, documentation, provider assignment, or Member outreach needed to activate service delivery.

Step 5: Molina assigns a Transitional Rent (TR) Provider

If the request is approved and the referral was not submitted by a contracted TR provider, Molina will assign a contracted provider based on the Member's county, housing setting, operational needs, and available contracted network. When appropriate, Molina may seek to align TR with the Member's existing ECM or housing-related Community Supports provider to support continuity and reduce duplication. Member preference should be considered whenever operationally feasible.

Assigned providers should ensure that documentation reflects the physical service location where the Member is residing, as this information may be required for claims processing and rate determination.

Once assigned, the TR provider is responsible for timely outreach to the Member, confirming readiness for service initiation, coordinating with relevant providers and county partners, and supporting implementation of the approved housing plan. Rental payments are made through the approved Molina provider and payment process and are not issued directly to the Member.

Transitional Rent referral checklist

Use this guide when preparing a Transitional Rent referral to Molina Healthcare of California.

Step	Process
County Behavioral Health Department Confirmation (required if Transitional Rent is used in an interim setting)	• If TR is requested for an interim housing setting, the referring entity is responsible for obtaining and providing documentation, as applicable, demonstrating that the Member has been reviewed for an appropriate longer-term housing pathway. • When applicable, this may include confirmation from the County Behavioral Health Department that the Member has been assessed for eligibility for Behavioral Health Services Act (BHSA) housing interventions or another long-term housing resource. • Molina does not independently obtain BHSA confirmation as part of the intake or authorization process. If required for the request, documentation must be submitted by the referring entity with the pre-screen or referral materials. • Acceptable forms of documentation include: email confirmation, application forms, case notes, or other written verification.
Molina eligibility determination	Include the following materials with a request for TR authorization: ☐ Transitional Rent pre-screen form ☐ Documentation of eligibility ◦ List any supporting documents or attestations needed, such as documentation that Member is experiencing or at risk of homelessness ☐ Housing Support Plan ☐ County Behavioral Health Department Confirmation ◦ Interim settings only ☐ Housing sustainability documentation ☐ Proof of anticipated long-term housing funding source (if available) ☐ Documentation of interim housing arrangement ◦ Interim settings only ☐ Lease agreement or landlord documentation ◦ Permanent settings only ☐ Documentation of monthly rent amount ☐ Submit inquiries and requests for Transitional Rent via email to MHC_TransitionalRent@MolinaHealthcare.com

Appendix

- [CalAIM Enhanced Care Management Policy Guide](#)
- [DHCS Community Supports Policy Guide: Volume 1](#)
- [DHCS Community Supports Policy Guide: Volume 2](#)

This document is based in part on guidance developed by [Homebase](#), a nonprofit organization focused on housing and homelessness policy, specifically the Medi-Cal Transitional Rent Eligibility and Access Guide for the Behavioral Health Population of Focus (December 2025), as well as DHCS Community Supports Policy Guide (Volumes 1 and 2).