# Transitional Rent Model of Care Template

**Due Date to DHCS**: September 2, 2025 (for go live on January 1, 2026)

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## Overview

In preparation for the implementation of Community Supports in January 2022, the California Department of Health Care Services (DHCS) released the **Community Supports Model of Care (MOC) Template** for Medi-Cal managed care plans (MCPs) to confirm their Community Supports elections and demonstrate operational readiness. MCPs have had the opportunity to resubmit the MOC Template every six months if they have changes to their Community Supports elections and/or corresponding policies and procedures.

MCPs will provide up to 6 months of Transitional Rent for transitioning populations who meet certain clinical criteria and who are experiencing or at risk of homelessness.

**On July 1, 2025 MCPs may optionally go-live with Transitional Rent. ​MCPs opting to launch at this time may choose one or more Transitional Rent-eligible populations (herein referred to as “Populations of Focus”), subject to DHCS approval** (see list of Populations of Focus in Section 1 below). These Populations of Focus are sub-sets of the total eligible population for Transitional Rent. Upon receiving approval, MCPs will be required to continue offering Transitional Rent for each of the Populations of Focus they elect to cover for the duration of the [BH-CONNECT waiver demonstration](https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/ca-bh-connect-01102025.pdf).

**On January 1, 2026, MCPs will be required to offer Transitional Rent for Members who meet the Behavioral Health Population of Focus criteria.** Also at this time, MCPs may choose to cover additional Populations of Focus, subject to DHCS approval. MCPs will be required to continue offering Transitional Rent for each of the additional Populations of Focus they elect to cover for the duration of the waiver demonstration.

Please note: The Transitional Rent Populations of Focus are separate and distinct from the Enhanced Care Management (ECM) Populations of Focus. However, DHCS expects that engagement in ECM will be a referral point into Transitional Rent for many members.

DHCS is releasing this standalone Transitional Rent MOC Template as a vehicle for MCPs to demonstrate their readiness to offer Transitional Rent to DHCS.

**DHCS reserves the right to update the Transitional Rent MOC questions contained in this document.**

## Transitional Rent Populations of Focus and Provider Capacity

Please complete the following section to describe the MCP’s strategy for offering Transitional Rent.

Some questions specifically prompt the MCP to provide responses by county. Even if not prompted, the MCP should note any variations by county. If details vary substantially between counties, MCPs may submit multiple responses to questions or sections of the Transitional Rent MOC Template that are clearly labeled by county.

MCP submissions must include responses for all entities delegated and subcontracted to administer Transitional Rent. For questions related to authorizations for Transitional Rent, including both the adjudication standards and the documentation used for referrals and authorizations, the Prime MCP and their subcontractors must align all standards and Policies and Procedures.

### Populations of Focus

1. **Using the supplementary Excel template titled “Transitional Rent MOC Excel File Populations of Focus Final Elections” indicate which Populations of Focus (POFs) in which county or counties will be served, and under which start date (7/1/2025 or 1/1/2026). A list of the Populations of Focus is available below for reference.**

*See* [*Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section VII.A and VII.B for details on the Transitional Rent eligibility criteria and the definitions of each Population of Focus.*

* 1. **Behavioral Health POF *(mandatory for all MCPs starting 1/1/26)***
	2. **Pregnant and postpartum POF**
	3. **Transitioning out of an institutional or congregate residential settings**
	4. **Transitioning out of a carceral setting**
	5. **Transitioning out of interim housing**
	6. **Transitioning out of recuperative care or short-term post-hospitalization housing**
	7. **Transitioning out of foster care**
	8. **Experiencing unsheltered homelessness**

### Transitional Rent Provider Capacity

1. **Please describe the MCP’s approach to Transitional Rent Provider[[1]](#footnote-2) Network development. Please ensure the following components are addressed in the description.**
2. **Provider recruitment;**
3. **Provider contracting;**
4. **Provider payment;**
5. **Provider relations and performance;**
6. **Provider reporting;**
7. **Provider training, support and resources to meet Transitional Rent service requirements; and**
8. **Provider Network monitoring and expansion**

**Word limit: 500 words per county**

1. **For each of the counties the MCP operates in, provide a brief overview of the MCP’s approach to building Transitional Rent Provider network/capacity to ensure adequate provider capacity to serve all eligible Members in the county, including Members with significant behavioral health needs. Note: In each county in which an MCP operates, the MCP must offer the county behavioral health agency a contract to serve as a Transitional Rent Provider. In this response, please also provide information on the progress of the MCP’s efforts to contract with each behavioral health agency in which it operates, as well as other county agencies as appropriate. For each county in which the MCP operates, please provide: (1) whether the MCP expects to have a contract executed with the behavioral health agency to serve as a Transitional Rent Provider by January 1, 2026; and if not, (2) the date by which the MCP expects a contract to be executed. If the MCP does not expect a contract to be executed, it should provide an explanation of the basis for the expected failure to contract. MCPs are also required to include a row in the supplementary Excel file titled “Transitional Rent MOC Provider Capacity”, indicating each of the county behavioral health agency the MCP has extended a contract to, along with the contract status (Please see question 24 for more information).**

**Word limit: 500 words per county**

## II. Transitional Rent Implementation

### Policies and Procedures

*For each question in this section, attach the MCP Policies and Procedures for delivery of Transitional Rent. Provide the file name of the attachment(s) for the Policies and Procedures and page number(s) within the Policies and Procedures that correspond to the question asked. If the response to this question is included in a response to a different question (e.g., if the MCP developed one (1) Policies and Procedures document for identifying Members for Transitional Rent* ***and*** *authorizing Members for Transitional Rent), add a cross-reference in the appropriate table.*

***MCPs must complete all sections of the MOC.***

#### MCP Responsibility for Administration of Transitional Rent

1. **Provide Policies and Procedures describing how Transitional Rent will be provided to eligible Members. Recognizing that MCPs may not exclude coverage of any specific setting or setting type (e.g., permanent, interim), please describe the specific settings or setting types the MCP intends to prioritize based on the unique characteristics of the county/counties in which it operates, along with the strategies the MCP intends to deploy to connect Members with permanent housing at the expiration of six months or sooner. This may include HUD vouchers or other federal, state or locally-funded subsidies, including housing interventions funded under the Mental Health Services Act (MHSA), and effective July 1, 2026, under the Behavioral Health Services Act (BHSA). Please also indicate if the MCP intends to pursue partnerships with one or more Flexible Housing Subsidy Pools (“Flex Pools”).**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Transitional Rent Providers

1. **Provide Policies and Procedures describing how the MCP will vet the qualifications of Transitional Rent Providers for whom a state-level Medi-Cal enrollment pathway does not exist. Please describe the Transitional Rent Provider’s role and responsibilities in the delivery of Transitional Rent - i.e., if they directly connect Members to housing, or if they serve as a community care hub and contract with organizations that provide housing – along with their experience and expertise in the delivery of Transitional Rent. Please indicate whether the Provider serves as a Lead Entity or as an Operator in a Flex Pool, as applicable.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Identifying Members for Transitional Rent

1. **Provide Policies and Procedures describing how the MCP will identify Members who may benefit from Transitional Rent, drawing on experience to date managing the Housing Trio Community Supports (i.e., Housing Transition Navigation Services, Housing Deposits, and Housing Tenancy and Sustaining Services) as well as ECM.** **The response should particularly focus on hard-to-reach populations and individuals with significant behavioral health needs.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide the written notices and/or call scripts for informing Members of:**
	1. **The transition to Community Supports, and specifically Transitional Rent, from other programs;**
	2. **Community Supports for which they may be eligible;**
	3. **Community Supports where a Member is automatically determined eligible and authorized when the Member is authorized for Transitional Rent (i.e., Housing Transition Navigation Services, Housing Deposits, Housing Tenancy and Sustaining Services);**
	4. **ECM where a Member is automatically determined eligible and authorized when the Member is authorized for Transitional Rent; and**
	5. **The transition to non-Medi-Cal housing subsidies and supports that create a path to permanent, stable housing for Members transitioning out of Transitional Rent.**

**Submit the template notice(s) and call script(s) for review.**

**MCP Member Notice(s) (List the file name(s)):**

**MCP Call Script(s) (List the file name(s)):**

**Provide brief additional information, as needed:**

#### Authorizing Members for Transitional Rent and Communication of Authorization Status

1. **Provide Policies and Procedures describing how the MCP will authorize Transitional Rent for eligible Members in an equitable and non-discriminatory manner. Please address the MCP’s approach to monitoring and evaluating Transitional Rent authorizations, for both permanent and interim settings, to ensure they are equitable, non-discriminatory, and timely, and what immediate actions the MCP will take if evaluation findings identify instances where service authorizations have had an inequitable effect.**

**As mentioned above, the Prime MCP and their subcontractors must align all standards and Policies and Procedures pertaining to authorizations, including both the adjudication standards and the documentation used for referrals and authorizations. This requirement applies to each Community Support commonly offered across a prime and its subcontractors.**

*See* [*Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section VII.F for information on Transitional Rent authorization requirements.*

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Streamlined Provisional Authorization Procedures: Provide Policies and Procedures describing the processes the MCP has developed to streamline provisional authorizations[[2]](#footnote-3) with county behavioral health agencies contracted with the Member’s MCP as a Transitional Rent Provider. Please describe how the streamlined provisional authorizations will be transmitted from the county behavioral health agency to the MCP, so that the MCP can quickly confirm eligibility and process the request for authorization.[[3]](#footnote-4)**

*See* [*Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section VII.H for information on streamlined provisional authorization with contracted county behavioral health agencies.*

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures for other situations that may be appropriate for expedited authorization or presumptive authorization/pre-authorization of Transitional Rent. MCPs are encouraged to work with Transitional Rent Providers to define a process and appropriate circumstances for presumptive authorization or pre-authorization of Transitional Rent whereby select Transitional Rent Providers would be able to directly authorize Transitional Rent, potentially only for a limited period of time, under specified circumstances, such as when a delay would be harmful to the Member or compromise their ability to secure housing.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures for how the MCP will discontinue, or deauthorize, Transitional Rent for Members who either no longer qualify for, or no longer require the service. Please be sure to describe how the MCP intends to track and monitor the following scenarios:**
2. **Members who have met the global cap on coverage of Room and Board services (i.e., Short-Term Post-Hospitalization Housing, Recuperative Care, and Transitional Rent). Under the cap, coverage is limited to a combined six months of all Room and Board services per Member per rolling 12-month period (e.g., two months of Short-Term Post-Hospitalization Housing and four months of Transitional Rent);**
3. **Members whose household has received the maximum of six months of Transitional Rent allowed under the BH-CONNECT demonstration period; and**
4. **Members who have transitioned to other housing programs or permanent settings.**

*See* [*Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section IV for information on the global cap on coverage of Room and Board services.*

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Referring Members to Transitional Rent Providers

1. **Provide Policies and Procedures describing how the MCP will refer Members who are eligible for Transitional Rent to Transitional Rent Providers, including the timeline the MCP intends to follow to make the referral. For Members enrolled in county behavioral health delivery system (i.e., SMHS, DMC, or DMC-ODS), address how the MCP will work with county behavioral health provider(s) to receive referrals for Transitional Rent and connect such Members with contracted Transitional Rent Providers, especially in the event that the county behavioral health provider is not contracted with the MCP to deliver Transitional Rent.**

**Word limit: 500 words per Transitional Rent Population of Focus.**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures describing how the MCP will ensure each Member authorized to receive Transitional Rent 1) agrees to the receipt of Transitional Rent and 2) how authorization will be obtained for data sharing when required by federal law (Note: MCPs are not obligated to obtain authorization for data sharing when not required by federal law). Indicate which entity (i.e., the MCP or the Transitional Rent Provider) will obtain Member agreement and data sharing authorization and how this will be documented.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Confirming Automatic Authorization For & Connecting Members to ECM and the “Housing Trio” Community Supports

*When the MCP authorizes a Member for Transitional Rent, it must also authorize the Member for ECM and the Housing Trio Community Supports.* [*See Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section VII.E for information on the automatic authorization for ECM and the Housing Trio when authorized for Transitional Rent.*

1. **Provide Policies and Procedures describing how the MCP will ensure Members who are authorized for Transitional Rent will automatically be authorized for ECM and the Housing Trio. Please include in this description the process the MCP will follow to notify the Member of their authorization for ECM and the Housing Trio.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures describing how the MCP will connect Members who are authorized for Transitional Rent, but who are not yet receiving ECM, to an ECM Provider. The policies and procedures should describe the process the MCP will deploy to ensure the ECM Provider begins conducting weekly in-person outreach visits** **as soon as feasible and acceptable to the Member, and no later than two weeks after a Member begins receiving Transitional Rent, to promote participation in ECM.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures describing how the MCP will connect Members who are authorized for Transitional Rent (and thus automatically authorized for the Housing Trio) to Housing Transition Navigation Services and Housing Tenancy and Sustaining Services Provider(s). Please also indicate the timeline the MCP intends to follow to make the connection, along with the efforts the MCP intends to deploy to follow up with the Member to promote receipt of Housing Transition Navigation Services and Housing Tenancy and Sustaining Services.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures describing how the MCP will connect Members who are authorized for Transitional Rent (and thus automatically authorized for the Housing Trio) to Housing Deposits. Please indicate if the Housing Deposits Provider will also provide Transitional Rent. If there are instances where there will be two separate providers for these services, please indicate how the MCP will promote seamless coordination for the Member.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

### Data System Requirements and Data Sharing to Support Community Supports

1. **Provide Policies and Procedures describing how the MCP intends to share each of the data elements that the ECM and Community Supports Contract and** [Community Supports Member Information Sharing Guidance](https://www.dhcs.ca.gov/Documents/MCQMD/CS-Member-Information-Sharing-Guidance.pdf) **requires MCPs to share with Community Supports Providers, including Transitional Rent Providers, i.e.:**
2. **MCP Community Supports Authorization Status files as defined in the Community Supports Member Information Sharing Guidance.**
3. **Encounter and claims data.**
4. **Physical, behavioral, administrative, and SDOH data (e.g., HMIS data).**
5. **Reports of performance on quality measures/metrics, as requested.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Oversight of Transitional Rent

1. **Provide Policies and Procedures for how the MCP will monitor the utilization of and/or outcomes resulting from the provision of the Transitional Rent. Include any activities, reports, and analyses the MCP will use to understand the impact of Transitional Rent delivery for these purposes. Please include how the MCP will maintain oversight, including program integrity, when Transitional Rent is arranged through a community care hub and/or a Flex Pool.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures for how the MCP will authorize Transitional Rent to ensure that the Room and Board service limitations for Transitional Rent, Recuperative Care and Short-Term Post-Hospitalization Housing are not exceeded. Include any data tracking and sharing activities planned for with the Community Support Provider, community care hub, and/or Flex Pool.**

*See* [*Community Supports Policy Guide Volume 2*](https://www.dhcs.ca.gov/Documents/MCQMD/DHCS-Community-Supports-Policy-Guide-Volume-2.pdf) *Section IV for information on the global cap on coverage of Room and Board services.*

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures for how the MCP will ensure a housing support plan is completed and maintained. The housing support plan includes information regarding how a Member can maintain housing and housing supports following the end of the Transitional Rent coverage period. For example, the housing support plan should identify payment sources and mechanisms for a Member following the end of the Transitional Rent benefit period. Please include how the MCP plans to engage its Community Support Providers, particularly the Housing Transition Navigation Services Provider to collect information to complete the housing support plan.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

#### Payment of Transitional Rent Providers

**MCPs will receive payments that include the costs of directly arranging for the provision of Transitional Rent and costs of contracting with a Transitional Rent Provider (including reasonable provider-level administrative costs).**

**DHCS will pay MCPs a fixed fee for the administrative costs associated with the provision of Transitional Rent, including both MCP and Transitional Rent Provider administrative responsibilities. DHCS is not directing MCPs on how to specifically allocate the administrative fee but expects MCPs to allocate the fee reasonably relative to the overall division of administrative responsibilities between the MCP and Transitional Rent Provider.**

1. **Provide Policies and Procedures describing the expected division of administrative responsibilities between MCPs and their contracted Transitional Rent Providers, and how the MCP intends to make additional administrative payments to its contracted Transitional Rent Providers (i.e., what is the payment model/arrangement), including the level of administrative payments the MCP intends to distribute to its contracted Transitional Rent Providers. Please include examples of all expected payment arrangements in this response, including potential arrangements with Flex Pools.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

1. **Provide Policies and Procedures describing how the MCP will ensure payment to Transitional Rent Providers is timely, as is required by the DHCS Managed Care Contract Template[[4]](#footnote-5) and CA Health and Safety Code Section 1371[[5]](#footnote-6) requirements. Include expected time-frames for payment and a description of any circumstances in which payment to a Transitional Rent Provider for a service provided should be expedited.**

**Word limit: 500 words**

**MCP Policies and Procedures (List the file names and page numbers):**

**Provide brief additional information, as needed:**

##  Transitional Rent Provider Capacity

1. **Using the supplementary Excel file titled “Transitional Rent MOC Provider Capacity,” list the MCP’s contracted Transitional Rent Providers by county. For each county the MCP operates in, the MCP must provide a contract status update on each county behavioral health agency and other county agencies with which the MCP has executed or extended a contract. If an MCP has not yet extended a contract to a county behavioral health agency in a particular county they operate in, please provide that reporting in the Excel file as well. Information requested includes the following:**
2. **Transitional Rent Provider Organization Name[[6]](#footnote-7)**
3. **National Provider Identifier (NPI) number, if applicable;**
4. **Provider Type** *(please also indicate if the provider is a community care hub and/or Flex Pool)*
5. **Contract Status**
6. **Counties in Which the Provider Will Operate as a Transitional Rent Provider** (*if Transitional Rent is not going to be offered county-wide, indicate the targeted service area of each Transitional Rent Provider)*
7. **Submit Transitional Rent Provider contract boilerplate: Attach the MCP’s planned Transitional Rent Provider contract that the MCP will use for contracting with its Transitional Rent Providers. Please provide a crosswalk for the location of each of the DHCS’ required provisions within the Transitional Rent Standard Provider Terms and Conditions.**
1. A Transitional Rent Provider is the entity that issues payment for housing for Members receiving Transitional Rent, or alternatively, directly provides housing for Members receiving Transitional Rent (as in the case of a nonprofit organization that owns and operates a permanent supportive housing project). A Transitional Rent Provider may also contract with other organizations that directly provide or issue payment for housing. [↑](#footnote-ref-2)
2. In a streamlined provisional authorization, the county behavioral health agency makes a temporary determination that the Member is qualified to receive Transitional Rent. This temporary authorization must be approved or denied by the MCP within the timelines set forth in the Community Supports Policy Guide Volume 2, in alignment with APL 21-011. [↑](#footnote-ref-3)
3. Consistent with [APL 21-011](https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-011.pdf), the MCP must authorize or deny coverage of Transitional Rent within the shortest applicable timeframe, but no longer than 5 business days from the MCP’s receipt of information reasonably necessary and requested by the MCP to make a determination, not to exceed 14 calendar days from the MCP’s receipt of the referral from the county behavioral health agency. [↑](#footnote-ref-4)
4. Available here: <https://www.dhcs.ca.gov/provgovpart/Documents/Two-Plan-CCI-Final-Rule-Boilerplate.pdf> [↑](#footnote-ref-5)
5. [California Health and Safety Code Section 1371 requirements](https://california.public.law/codes/ca_health_and_safety_code_section_1371) [↑](#footnote-ref-6)
6. Or Individual Provider, if not part of an Organization [↑](#footnote-ref-7)