

Los Angeles County Department of Mental Health Behavioral Health Services Act Housing Interventions Resource Packet

**Housing Division
Last Updated: 9/1/26**

NOTE: This packet will continue to be updated as BHSA guidance evolves and more information becomes available from the State.

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INTRODUCTION

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Introduction

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Packet Purpose

This packet is intended to assist Los Angeles County Department of Mental Health (DMH) service providers and administrative teams with understanding the changes brought about by the Behavioral Health Services Act (BHSA) related to housing services, also known as Housing Interventions (HI), and provide guidance as they navigate these updates.

- **DMH service providers** should use this packet to identify the BHSA HI services that may be available to their clients and the requirements related to accessing these services.
- **DMH administrative teams** who oversee programs that use BHSA HI funding, also referred to as impacted programs, should use this packet to identify the new BHSA HI requirements that they will be responsible for implementing and determine how best to incorporate them into their program workflows, guidelines and procedures. Administrative teams include:
 - Housing Division
 - BHSA Administration
 - Prevention Services
 - Facilitation and Implementation Unit (FIU)
 - Office of Transition Age Youth (TAY)

Supporting Documents

Included in this packet are the following supporting documents:

1. **[BHSA Housing Interventions Fact Sheet](#)**
 - Provides a high-level overview of BHSA HI requirements and their impact on DMH directly-operated programs and contracted providers.
2. **[BHSA Housing Interventions Workflow for DMH Programs](#)**
 - Outlines the steps required to utilize DMH BHSA HI funds. DMH administrative teams may modify this document to meet their specific program needs.
3. **[BHSA Housing Interventions Eligibility and Documentation Checklist](#)**
 - Details the eligibility and documentation requirements to utilize BHSA HI funds.
4. **[BHSA Allowable Housing Interventions and Key Requirements](#)**
 - Lists all allowable BHSA HI including which DMH programs offer each resource, whether housing-related Medi-Cal benefits under CalAIM Community Supports – Transitional Rent or Housing Deposits must be pursued and whether habitability checks are required.
5. **[BHSA Housing Interventions Frequently Asked Questions \(FAQs\)](#)**
 - Gathers frequently asked questions and answers related to BHSA HI.
6. **[BHSA Housing Interventions Definitions](#)**
 - Defines core terminology related to BHSA HI including providing the BHSA definitions of experiencing homelessness, chronically homeless and at-risk of homelessness, which differ from the definitions used by the U.S. Department of Housing and Urban Development (HUD) and the Housing Authorities.

BHSA Housing Interventions Fact Sheet

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Los Angeles County Department of Mental Health

Behavioral Health Services Act Housing Interventions

Fact Sheet

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Behavioral Health Services Act

Effective July 1, 2026, the Behavioral Health Services Act (BHSA) replaces the Mental Health Services Act (MHSA) of 2004. It reforms behavioral health care funding to prioritize services for people with the most significant mental health needs while adding the treatment of substance use disorders, expanding housing interventions and increasing the behavioral health workforce. It also enhances oversight, transparency and accountability at the state and local levels and creates pathways to ensure equitable access to care by advancing equity and reducing disparities for individuals with behavioral health needs.

BHSA Housing Interventions

Housing services that are eligible to be funded by BHSA are known as Housing Interventions (HI). Under BHSA, 30% of BHSA funding received by the Department of Mental Health (DMH) must be spent on HI that meet the needs of people [experiencing](#) or [at-risk of homelessness](#). Of this funding, 50% must be used for individuals who are [chronically homeless](#), with a focus on those living in [encampments](#).

Allowable housing services under BHSA HI include:

Interim Housing (Time-Limited):	- Interim Housing - Motel/Hotel Stays		
Permanent Housing (Non-Time-Limited):	- Rental Subsidies - Licensed Residential Care - License-Exempt Room & Board	- Sober Living Home - Single Room Occupancy (SRO)	- Shared Housing - Master Leasing
Other Housing Supports:	- ID/Document Costs - Housing Application Fees - Credit Report Fees - Security Deposits - Utility Deposits - Storage Fees - Move-In Costs - Furniture	- Move-In Costs - Transportation (e.g., moving truck, movers) - Pet Deposits/Other Pet Costs (e.g., temporary pet boarding) - Rent and Utility Arrears	- Damage Reimbursement - Eviction Prevention

BHSA HI Requirements

Under BHSA, any DMH program providing housing services funded by BHSA HI is responsible for ensuring the following requirements are met:

- The housing services paid for with BHSA HI funds are [allowable](#) under BHSA.
- Clients receiving housing services paid for with BHSA HI funds meet the BHSA definition of [experiencing homelessness](#), [chronically homeless](#) or [at-risk of homelessness](#) in addition to the access criteria for specialty mental health services.
- Clients receiving housing services paid for with BHSA HI funds are entered into the [Homeless Management Information System \(HMIS\)](#) along with all required data elements so that DMH can meet BHSA reporting requirements. This includes data on homeless and encampment status.
- [Habitability checks](#) are completed for select interim and permanent housing settings paid for with BHSA HI funds.
- Clients who are members of a Medi-Cal Managed Care Plan (MCP) apply for housing-related benefits that they may be eligible for under the CalAIM Community Supports – Transitional Rent and Housing Deposits programs. **(NOTE: Implementation by DMH is on hold until further notice.)**

CalAIM Community Supports – Transitional Rent and Housing Deposits

Transitional Rent (TR) and Housing Deposits (HD) are CalAIM Community Supports benefits intended to support eligible Medi-Cal MCP members with their transition to stable housing as follows:

Transitional Rent and Housing Deposits - Benefits Overview	
Transitional Rent	- Provides up to 6 months of rental assistance in eligible interim/permanent housing settings. - Excludes congregate interim housing settings, motel/hotel stays used as short-term emergency shelter and licensed residential care. - Does not need to be used continuously or in conjunction with HD but cannot be accessed again once the benefit is exhausted – even if the client moves to another housing setting.
Housing Deposits	- Provides one-time assistance to secure and establish permanent housing including security deposits, utility deposits, utility set-up fees and first month utility expenses. - Can also be used for medically necessary items needed to establish a safe home like air conditioners, heaters and hospital beds. - Does not need to be used in conjunction with TR but cannot be accessed again once HD benefit is exhausted – even if the client moves to another housing setting.

The DMH Housing Division will manage TR/HD for the Department and partner with the Department of Homeless Services and Housing (HSH) to submit TR/HD authorization requests to the local Medi-Cal MCPs for eligible DMH clients. DMH service providers are responsible for determining whether a TR/HD application is required to be submitted for their client and ensuring the application and authorization process is completed.

IMPORTANT: *DMH clients are not required to obtain Medi-Cal MCP approval before receiving a TR/HD eligible service, but DMH must submit a TR/HD authorization request to the MCP for any eligible client.*

Impact on DMH Administrative Teams and Service Providers

DMH administrative teams will work closely with service providers to ensure DMH clients using BHSA HI funded resources meet all BHSA HI requirements including those related to TR/HD. See below for a list of the DMH programs that use BHSA HI funding as well as the administrative team providing program oversight and their contact details for further support as needed.

DMH Administrative Team	DMH Impacted Program	Contact Email
BHSA Administration	Client Support Funds	ClientSupportFunds@dmh.lacounty.gov
Facilitation and Implementation Unit (FIU)	- CAL-Card Program - Procurement Request Tracking System (PTS)	- FMT@dmh.lacounty.gov - Calcardspreapproval@dmh.lacounty.gov (CAL-Card questions only)
Housing Division	- Interim Housing Program (IHP) - Enriched Residential Care (ERC) - Rental and Housing Assistance Program (RHAP)	- IHP@dmh.lacounty.gov - ERC@dmh.lacounty.gov - DMH_FHSP@dmh.lacounty.gov
Office of Transition Age Youth (TAY)	- Enhanced Emergency Shelter Program (EESP) - TAY Drop-In Centers	AskTAY@dmh.lacounty.gov
Prevention Services	United Mental Health Promoters (UMHP)	CP-UMHPPProject@dmh.lacounty.gov

Additional Resources

DMH has developed the [BHSA Housing Interventions Resource Packet](#) to support administrative teams and service providers with implementing the new BHSA HI requirements by providing workflows, checklists, FAQs and definitions. For any other questions related to BHSA HI, contact: BHSAHousing@dmh.lacounty.gov.

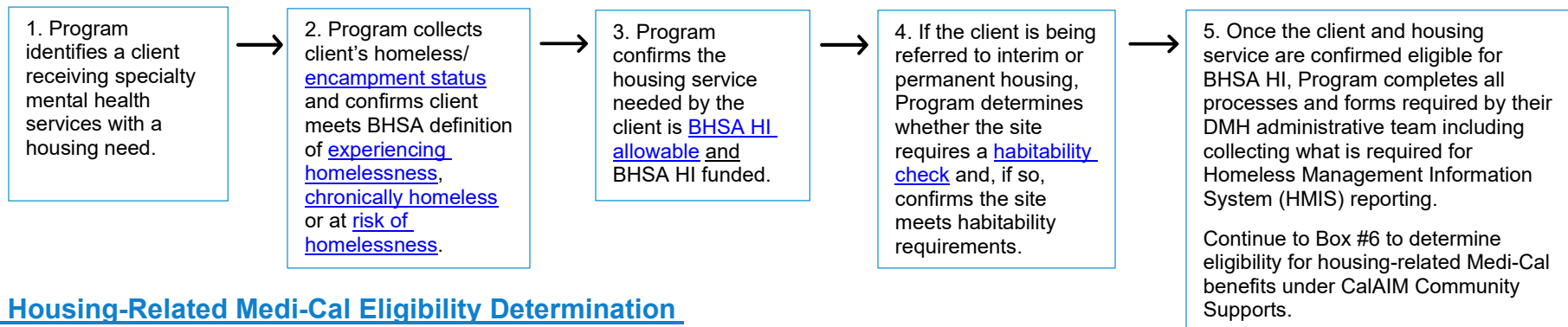
BHSA Housing Interventions Workflow for DMH Programs

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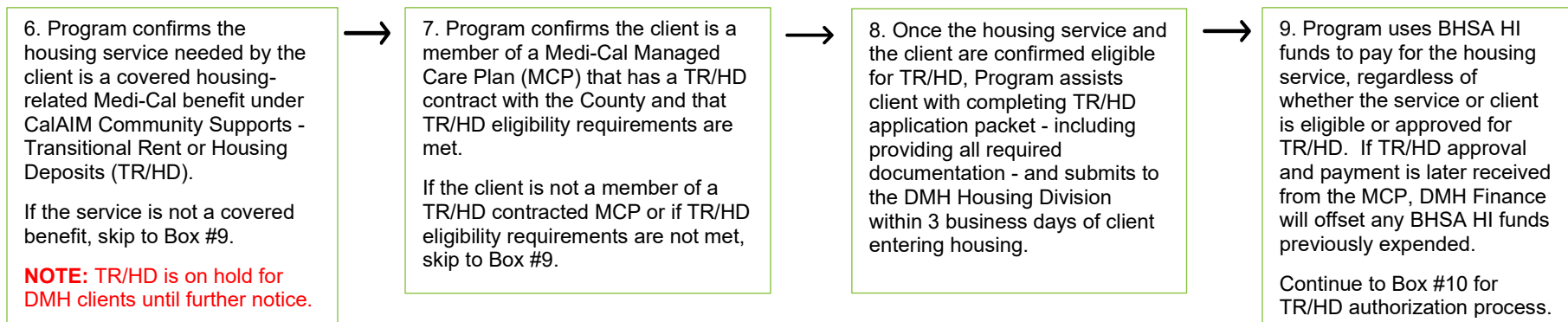
Los Angeles County Department of Mental Health Behavioral Health Services Act Housing Interventions Workflow for DMH Programs*

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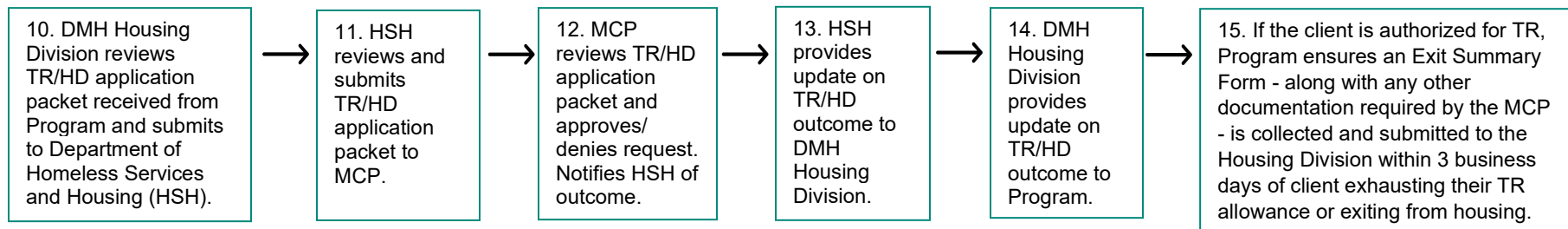
A. Behavioral Health Services Act Housing Interventions (BHSA HI) Eligibility Determination



B. Housing-Related Medi-Cal Eligibility Determination



C. CalAIM Community Supports - Transitional Rent/Housing Deposits Authorization Process



*DMH administrative teams may modify this workflow for the impacted programs that they are responsible for overseeing.

BHSA Housing Interventions Eligibility and Documentation Checklist

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**Los Angeles County Department of Mental Health
Behavioral Health Services Act Housing Interventions
Eligibility and Documentation Checklist**
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A. [Serious Mental Illness \(SMI\) Status](#)

1. Does the client meet access criteria for Specialty Mental Health Services (i.e., has SMI)?

- ☐ Yes - *Proceed to Section B, Homeless Status.*
- ☐ No - **STOP**. *Client is not eligible for Behavioral Health Services Act Housing Interventions (BHSA HI) and should be referred to a resource paid for by another funding source.*

B. [Homeless Status](#)

1. What is the client's current homeless status as defined under BHSA? (See [BHSA Housing Interventions Definitions](#) for homeless status definitions.)

- ☐ Experiencing homelessness - *Proceed to Section C, Encampment Status.*
- ☐ Chronically homeless - *Proceed to Section C, Encampment Status.*
- ☐ At risk of homelessness - [Skip to Section D, Housing Service Eligibility.](#)
- ☐ Other - **STOP**. *Client is not eligible for BHSA HI and should be referred to a resource paid for by another funding source.*

C. [Encampment Status](#)

1. If the client is experiencing homelessness or chronically homeless, did they sleep last night in an encampment? (See [BHSA Housing Interventions Definitions](#) for encampment definition.)

- ☐ Yes - *Proceed to Section D, Housing Service Eligibility.*
- ☐ No - *Proceed to Section D, Housing Service Eligibility.*
- ☐ Unknown - *Proceed to Section D, Housing Service Eligibility. (Will count status as "No".)*

D. [Housing Service Eligibility](#)

1. Is the housing service needed by the client both BHSA HI allowable and BHSA HI funded? (See [BHSA Allowable Housing Interventions and Key Requirements](#) for list.)

- ☐ Yes, client referred to one of the below – [Skip to Section F, Housing-Related Medi-Cal Coverage](#) as housing service is either exempt from habitability requirements or DMH Housing Division will determine habitability.
 - Interim housing funded by the DMH Interim Housing Program
 - Motel/Hotel used as Short-Term Emergency Shelter
 - Licensed Residential Care (non-time-limited permanent housing)
 - Other Housing Supports: Landlord Outreach & Mitigation and Participant Assistance Funds (Damages, Eviction Prevention, Move-In Costs, etc.)
- ☐ Yes, client referred to interim housing **not** funded by the DMH Interim Housing Program - *Proceed to Question E1, Housing Habitability Status.*
- ☐ Yes, client referred to another type of permanent housing (Apartment, Shared Housing, Sober Living or other non-time-limited setting) - *Proceed to Question E2, Housing Habitability Status.*
- ☐ No - **STOP**. *Client is not eligible for BHSA HI and should be referred to a resource paid for by another funding source.*

E. Housing Habitability Status (Only for the referral types referenced in Section D)

1. If the client is being referred to interim housing not funded by the DMH Interim Housing Program, does the site meet [BHSA habitability requirements](#)?

- ☐ Yes - *Proceed to Section F, Housing-Related Medi-Cal Coverage.*
- ☐ No - **STOP.** *Site is not eligible to be funded by BHSA HI until it meets habitability requirements. If habitability issues cannot be resolved, client should be referred to a different interim housing site that meets habitability requirements.*

2. If the client is being referred to a non-time-limited permanent housing setting (excluding Licensed Residential Care), does the site meet [BHSA habitability requirements](#)?

- ☐ Yes - *Proceed to Section F, Housing-Related Medi-Cal Coverage.*
- ☐ No - **STOP.** *Site is not eligible to be funded by BHSA HI until it meets habitability requirements. If habitability issues cannot be resolved, client should be referred to another site that meets habitability requirements.*

F. Housing-Related Medi-Cal Coverage

1. Is the housing service needed by the client a covered housing-related Medi-Cal benefit under CalAIM Community Supports – Transitional Rent or Housing Deposits? (See [BHSA Allowable Housing Interventions and Key Requirements](#) for list.)

NOTE: Transitional Rent/Housing Deposits are currently on hold for DMH clients. In the meantime, programs may use BHSA HI funds to support BHSA HI allowable services for eligible clients.

- ☐ Yes, covered by Transitional Rent - *Proceed to Section G, Medi-Cal Managed Care Plan Status.*
- ☐ Yes, covered by Housing Deposits - *Proceed to Section G, Medi-Cal Managed Care Plan Status.*
- ☐ No – [Skip to Section J](#), HMIS Documentation. BHSA HI funding may be used to cover the service.

G. Medi-Cal Managed Care Plan Status

1. Is the client a Medi-Cal Managed Care Plan (MCP) member?

- ☐ Yes, Medi-Cal CIN#: _____
(Visit [MEDSLite](#) to verify Medi-Cal eligibility.)

MCP Name (check one):

- ☐ a. LA Care
 - ☐ b. Healthnet
 - ☐ c. Kaiser Permanente
 - ☐ d. Anthem Blue Cross
 - ☐ e. Molina Healthcare
 - ☐ f. Blue Shield
 - ☐ g. Positive Healthcare
 - ☐ h. SCAN
- ☐ No - [Skip to Section J](#), HMIS Documentation.

Answers a-e: For Transitional Rent, proceed to Section H, Transitional Rent Eligibility. For Housing Deposits, [skip to Section J](#), Transitional Rent/Housing Deposits Required Documentation. Client has already confirmed eligibility for Housing Deposits benefits in Sections A and B.

Answer f: For Transitional Rent, proceed to Section H, Transitional Rent Eligibility. For Housing Deposits, [skip to Section J](#), HMIS Documentation. Since Blue Shield does not offer Housing Deposits benefits at this time, no MCP application is needed, and BHSA HI funds may be used to cover BHSA allowable expenses.

Answers g-h: [Skip to Section J](#), HMIS Documentation. The County does not have contracts with these MCPs to administer Transitional Rent or Housing Deposits benefits at this time, so BHSA HI funds may be used to cover BHSA allowable expenses.

H. Transitional Rent Eligibility

1. If the client is a Medi-Cal MCP member and the needed housing service is a covered benefit available from the MCP under Transitional Rent, does the client meet one of the following target populations (in addition to meeting the above access criteria for Specialty Mental Health Services and definition of experiencing homelessness, chronically homeless or at risk of homelessness)? **NOTE: Clients who are eligible for Transitional Rent are automatically eligible for Housing Deposits.**

- ☐ Yes - Indicate target population below and proceed to Question H2.

Target Population:

- ☐ a. Experiencing unsheltered homelessness
 - ☐ b. Transitioning out of interim housing
 - ☐ c. Transitioning out of a carceral setting
 - ☐ d. Transitioning out of recuperative care or short-term post-hospitalization housing
 - ☐ e. Transitioning out of foster care
 - ☐ f. Transitioning out of an institutional or congregate residential setting
 - ☐ g. Eligible for a Full Service Partnership (FSP) program
- ☐ No – [Skip to Section J](#), HMIS Documentation. Client will not be able to utilize Transitional Rent benefits but may still be eligible for BHSA HI.

2. Is the cost of rent equal to or less than the Medi-Cal reimbursable ceiling percentage of Small Area Fair Market Rent (SAFMR)? (SAFMR calculator in development)

- ☐ Yes - Proceed to Section I, Transitional Rent/Housing Deposits Documentation.
- ☐ No - **STOP.** Client will not be able to utilize Transitional Rent benefits. Consult with your DMH administrative team on whether BHSA HI may be used. If BHSA HI is eventually used, skip to Section J, HMIS Documentation.

I. Transitional Rent/Housing Deposits Documentation

1. If it is determined that both the housing service and the client meet Transitional Rent/Housing Deposits eligibility requirements, has the required documentation been submitted to the DMH Housing Division within three business days of the client entering or exiting housing? (Required documentation may vary among MCPs.)

- ☐ Yes - Confirm documentation completion below and proceed to Section J, HMIS Documentation.

Application Documentation:

- ☐ MCP Service Authorization Request Form
- ☐ Housing Support Plan (only for Transitional Rent)
- ☐ Universal Consent Form
- ☐ CalAIM Community Supports Opt-In Form
- ☐ County Notification of Privacy Practices
- ☐ Housing Inspection Form/Report (only for Transitional Rent to confirm habitability)
- ☐ Executed Lease (only for non-time-limited permanent housing settings)
- ☐ Executed Bed/Room Occupancy Agreement (only for time-limited interim settings)

Exit Documentation:

- ☐ Exit Summary Form (only for Transitional Rent and upon exhaustion of Transitional Rent allowance or exit from housing)
- ☐ No - *Work to submit the required documentation as soon as possible and proceed to Section J, HMIS Documentation. BHSA requires that eligible Medi-Cal MCP members apply for Transitional Rent and Housing Deposits benefits if they are in need of housing services allowable under BHSA HI that are also covered by the MCP.*

NOTE: Regardless of whether the client or housing service is approved for Transitional Rent or Housing Deposits, BHSA HI funds may be used to pay for BHSA HI allowable services for eligible clients. If approval and payment is later received from the MCP, DMH Finance will offset any BHSA HI funds previously expended.

J. HMIS Documentation

DMH Administrative Teams ONLY:

1. If the client is approved for and begins receiving a housing service that is BHSA HI allowable and BHSA HI funded, were the required data elements entered into the Homeless Management Information System (HMIS)?

- ☐ Yes – *No further action needed.*
- ☐ No – *Work on data collection plan with service provider and/or data entry plan with DMH administrative staff. BHSA requires that all clients provided with housing services paid for with BHSA HI funds be entered into HMIS.*

BHSA Allowable Housing Interventions and Key Requirements

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Behavioral Health Services Act (BHSA)
Allowable Housing Interventions and Key Requirements
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BHSA Allowable Housing Interventions	DMH Impacted Programs	Is the Housing Intervention a Covered Benefit under CalAIM Community Supports - Transitional Rent (TR) or Housing Deposits (HD)?	Is a Habitability Check Required?
Time-Limited Interim Settings			
Interim Housing - Non-Congregate	· Housing Division – Interim Housing Program (IHP) · Contract Providers using Client Support Funds – Housing Interventions (HI) · Office of TAY – Enhanced Emergency Shelter Program (EESP)	Yes, TR	Yes
Interim Housing - Congregate	· Housing Division – IHP · Contract Providers using Client Support Funds – HI	No	Yes
Motel/Hotel Stays	· Housing Division – IHP · Directly- Operated (DO) Programs using CAL-Cards and/or Procurement Request Tracking System (PTS) · Contract Providers using Client Support Funds – HI	No, unless motel/hotel has beds dedicated for DMH clients	No, unless motel/hotel has beds dedicated for DMH clients
Non-Time-Limited Permanent Settings			
Rental Subsidies (includes apartments, single and multi-family homes, mobile homes and accessory dwelling units [ADUs])	· Housing Division – Rental Housing Assistance Program (RHAP)	Yes, TR	Yes
Licensed Residential Care (includes Adult Residential Facilities [ARFs] and Residential Care Facilities for the Elderly [RCFEs])	· Housing Division – Enriched Residential Care (ERC) Program · Contract Providers using Client Support Funds – HI	No	No
License-Exempt Room and Board	· Contract Providers using Client Support Funds – HI	Yes, TR	Yes
Sober Living Homes	· Contract Providers using Client Support Funds – HI	Yes, TR	Yes
Single Room Occupancy (SRO)	· Contract Providers using Client Support Funds – HI	Yes, TR	Yes
Shared Housing	· Contract Providers using Client Support Funds – HI	Yes, TR	Yes
Master Leasing	· Contract Providers using Client Support Funds – HI	Yes, TR	Yes

BHSA Allowable Housing Interventions and Key Requirements (cont.)

BHSA Allowable Housing Interventions	DMH Impacted Programs	Is the Housing Intervention a Covered Benefit under CalAIM Community Supports - Transitional Rent (TR) or Housing Deposits (HD)?	Is a Habitability Check Required?
Other Housing Supports – Landlord Outreach and Mitigation			
Damage Reimbursement	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Eviction Prevention (i.e., anticipated need for rental assistance due to loss of income)	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Other Housing Supports – Participant Assistance Funds			
ID/Document Costs	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Housing Application Fees	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	Yes, HD	No
Credit Report Fees	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Security Deposits	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	Yes, HD	No
Utility Deposits	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	Yes, HD	No
Storage Fees	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No

BHSA Allowable Housing Interventions and Key Requirements (cont.)

BHSA Allowable Housing Interventions	DMH Impacted Programs	Is the Housing Intervention a Covered Benefit under CalAIM Community Supports - Transitional Rent (TR) or Housing Deposits (HD)?	Is a Habitability Check Required?
Move-In Costs - Furniture	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	Yes, HD* (Limitations apply. BHSA HI funding may be used for allowable items not covered by HD benefit.)	No
Move-In Costs - Transportation (e.g., moving truck, movers)	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Pet Deposits/Other Pet Costs (e.g., temporary pet boarding)	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Rent Arrears (i.e., back rent owed to avoid eviction)	· Housing Division - RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	No	No
Utility Arrears	· Housing Division – RHAP · DO Programs using CAL-Cards and/or PTS · Contract Providers using Client Support Funds – HI	Yes, HD	No

* Housing Deposits benefits may cover goods, such as an air conditioner or heater and other medically-necessary adaptive aids and services designed to preserve an individuals' health and safety in the home such as hospital beds, Hoyer lifts, air filters and specialized cleaning or pest control supplies etc., that are necessary to ensure access and safety for the individual upon move-in to the home when they are not otherwise available to the client under Medi-Cal.

BHSA Housing Interventions Frequently Asked Questions (FAQs)

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Los Angeles County Department of Mental Health Behavioral Health Services Act Housing Interventions Frequently Asked Questions (FAQs)

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[A. Background](#) [\(back to top\)](#)

1. What is the Behavioral Health Services Act?

Effective July 1, 2026, the Behavioral Health Services Act (BHSA) replaces the Mental Health Services Act of 2004. It reforms behavioral health care funding to prioritize services for people with the most significant mental health needs while adding the treatment of substance use disorders, expanding housing interventions and increasing the behavioral health workforce. It also enhances oversight, transparency and accountability at the state and local levels and creates pathways to ensure equitable access to care by advancing equity and reducing disparities for individuals with behavioral health needs. BHSA is a component of the transformation initiated by Proposition 1. The second part of Proposition 1, the Behavioral Health Bond, authorizes \$6.4 billion in bonds to finance behavioral health treatment beds, supportive housing, community sites and funding for housing Veterans with behavioral health needs.

2. What are BHSA Housing Interventions (BHSA HI)?

Housing services that are eligible to be funded by BHSA are known as **Housing Interventions**.

[B. Eligibility and Requirements](#) [\(back to top\)](#)

1. How do I know if my client is eligible for BHSA HI?

DMH has created a checklist to assist with determining client eligibility: [BHSA Housing Interventions Eligibility and Documentation Checklist](#). Clients who meet the [access criteria for Specialty Mental Health Services](#) and are experiencing homelessness, chronically homeless or at-risk of homelessness are generally eligible; however, each BHSA HI may have its own additional eligibility requirements.

2. How do I know which housing services are allowable to be funded under BHSA?

DMH has created a chart to assist with determining allowable BHSA HI: [BHSA Allowable Housing Interventions and Key Requirements](#).

3. If a client or service is not eligible for BHSA HI funding, does that mean they cannot be assisted with housing?

No. Other funding sources may still be available to assist the client. Consult with your DMH administrative team if needed.

4. If my program does not have funding for BHSA HI in its budget, does that mean we cannot assist clients with housing?

No. Housing resources may still be funded through other funding streams within your program's budget. It may also be possible for you to access housing resources managed by other programs such as those managed by the DMH Housing Division or TAY Division.

5. Are the BHSA definitions of homelessness the same as the U.S. Department of Housing and Urban Development (HUD) definitions or the definitions used by the Housing Authorities?

No. The homeless definitions under BHSA are different from HUD homeless definitions (i.e., the definitions used by the Housing Authorities) and are designed to be more inclusive. DMH has compiled the relevant BHSA homeless definitions in the following resource: [BHSA Homeless Interventions Definitions](#).

6. Are DMH clients who are transitioning from a licensed Adult Residential Facility or Residential Care Facility for the Elderly to a permanent supportive housing subsidy under the DMH Rental and Housing Assistance Program (RHAP) still eligible for BHSA HI funding?

Yes, clients are eligible for BHSA HI funding so long as they met the BHSA definition of experiencing homelessness, chronically homeless or at risk of homelessness at the time they moved into the licensed residential care facility.

7. Is BHSA HI funding for interim housing beds only available for a total of 12 months?

Although BHSA HI policy requires limiting the funding of client stays in interim housing to 12 months, DMH understands that this creates barriers for some of our most vulnerable clients – especially given that there are limited permanent housing resources available, which may make lengths of stay in interim housing longer than 12 months necessary in some cases. Since July 1, 2026 is the start date for this BHSA HI policy requirement, no clients will be impacted by the time limits this first year of BHSA. In the meantime, DMH will continue to seek clarification from the Department of Health Care Services (DHCS) regarding their time limit requirement and advocate for policy change given the impact on our clients if they were to return to homelessness because of this requirement. Further guidance on this matter will be provided by DMH before the second year of BHSA begins.

C. Workflows, Forms and Training ([back to top](#))

1. How do I know what steps I need to take and when to use BHSA HI funding? What are the requirements?

DMH has developed a workflow to help DMH administrative staff and service providers understand what is required to utilize BHSA HI funds: [BHSA Housing Interventions Workflow for DMH Programs](#).

2. Will the application process or forms change for any of the DMH housing programs because of the transition to BHSA?

Yes. DMH impacted programs have or are in the process of updating many of their applications, workflows and forms to reflect the new BHSA HI requirements. A new Provider Invoicing System (PIS) for DMH contracted providers has also been launched. DMH administrative teams are responsible for keeping staff and service providers informed of the changes happening for the programs they oversee. A list of DMH administrative teams and their impacted programs can be found on the [BHSA Housing Interventions Fact Sheet](#).

3. Has there been training provided on the BHSA HI changes?

Yes. A BHSA HI presentation and Q&A session was provided to DMH contracted providers at the DMH All Providers Meeting held on June 18, 2026, with a recording of the meeting and [packet](#) of relevant materials sent afterward. The DMH Housing Division also held meetings with DMH administrative teams focused on BHSA HI implementation. The Department will announce future BHSA HI training opportunities.

D. HMIS Data Entry and Reporting ([back to top](#))

1. What is the Homeless Management Information System (HMIS)?

HMIS is a secure online database that enables organizations to collect client-level, system-wide information on the services that are provided to people experiencing homelessness, chronically homeless and at risk of homelessness. The Los Angeles Homeless Services Authority (LAHSA) administers HMIS for the Los Angeles Continuum of Care (CoC). The communities of Glendale, Long Beach and Pasadena also each have their own CoCs and HMIS platforms.

2. For BHSA HI, what data must be captured in HMIS and why?

Any client being funded through BHSA HI must be entered into HMIS along with all required data elements so that DMH can meet its BHSA HI reporting requirements. The California Department of Health Care Services (DHCS) will review this data at the aggregate level and will use it to evaluate DMH's success in assisting our unhoused clients.

3. Do DMH service providers have to enter client information into HMIS for their DMH housing programs receiving BHSA HI funding?

No. HMIS data entry for clients receiving services funded by BHSA HI will primarily be centralized and completed by DMH administrative teams. However, service providers are responsible for collecting all data elements and consents/authorizations required by their DMH administrative team, which will be used to complete HMIS data entry and reporting requirements.

E. Habitability Requirements ([back to top](#))

1. What are habitability checks?

Under BHSA policy, housing settings paid for with BHSA HI funds must meet minimum standards of habitability. This includes select interim housing and permanent housing settings where ongoing rent costs are being subsidized. In order to ensure these minimum standards of habitability are met, DMH and its contract providers are required to perform inspections of all applicable sites or contract with another entity to do so. These inspections are known as habitability checks. For further information on how your program should address habitability checks, contact your DMH administrative team.

2. Are habitability checks always required?

No. Hotels and motels used as short-term emergency shelter and licensed residential facilities do not require habitability inspections as they are governed by other regulatory bodies. Habitability checks are also not required for Other Housing Supports under BHSA HI including Participant Assistance Funds (when provided as a stand-alone service and not in combination with a rental subsidy) and Landlord Outreach & Mitigation. See [BHSA Allowable Housing Interventions and Key Requirements](#) for further details on which Housing Interventions require habitability checks.

3. When required, how often do habitability checks need to be completed?

Annual inspections are sufficient to meet BHSA HI requirements unless complaints or other issues arise that warrant additional inspections.

4. Who is responsible for completing habitability checks and what tools can be used?

DMH will be responsible for coordinating habitability inspections for its directly-operated programs using BHSA HI funds and will contract out for this service. DMH contract providers are also responsible for meeting this requirement for all applicable housing settings under BHSA HI and may either conduct the habitability inspections themselves or contract out for this service. Housing settings requiring habitability inspections must meet either the [NSPIRE](#) habitability standards established by HUD or the California state habitability standards cited in the BHSA Policy Manual (see California Civil Code sections [1941](#), [1941.1](#), [1941.3](#)).

F. Housing-Related Medi-Cal Benefits [\(back to top\)](#)

1. Under BHSA HI, what are the requirements around using housing-related Medi-Cal benefits?

BHSA HI funding may not be used for housing services covered by Medi-Cal Managed Care Plans (MCP). For this reason, it is required that eligible MCP members apply for housing-related Medi-Cal benefits under their MCP's CalAIM Community Supports – Transitional Rent and Housing Deposits programs if they are in need of housing services allowable under BHSA HI. However, it is important to note that regardless of whether the MCP authorizes the client for Transitional Rent or Housing Deposits benefits, BHSA HI funds may still be used up front to pay for BHSA HI allowable services for eligible clients. If approval and payment is later received from the MCP, DMH Finance will offset any BHSA HI funds previously expended.

2. What are CalAIM Community Supports? What is Transitional Rent? What are Housing Deposits?

Under CalAIM, Medi-Cal MCPs are authorized to cover housing-related Community Supports to enhance the overall health and well-being of its members. Transitional Rent and Housing Deposits are two such Community Supports that provide assistance with securing and maintaining housing.

3. What do Transitional Rent and Housing Deposits benefits cover?

Transitional Rent provides eligible Medi-Cal MCP members with up to six months (182 days) of rental assistance in eligible interim and permanent housing settings including:

- Interim housing sites funded by the DMH Interim Housing Program
- Other interim settings with no more than three unrelated individuals per room depending on the size and privacy configurations
- Apartments and single-family homes
- Shared housing

Transitional Rent may also cover certain housing-related costs that are included in the rental payment such as storage fees, amenity fees and landlord-paid utilities charged as part of rent.

Housing Deposits provides eligible Medi-Cal MCP members with assistance with one-time costs associated with establishing permanent housing including:

- Security deposits required to obtain a lease on an apartment or home.
- Set-up fees/deposits for utilities or service access and payment in utility arrears.
- First month coverage of utilities, including but not limited to telephone, gas, electricity, heating, and water.

- Services necessary for an individual's health and safety, such as pest eradication and one-time cleaning prior to occupancy, along with necessary minor repairs to meet HUD Housing Choice Voucher program quality standards or other habitability standards, as applicable, where the costs are not the responsibility of the landlord under applicable law.
- Application fees to cover the cost of the lease application.
- Goods such as an air conditioner or heater, and other medically-necessary adaptive aids and services, designed to preserve an individuals' health and safety in the home such as hospital beds, Hoyer lifts, air filters, specialized cleaning or pest control supplies etc., that are necessary to ensure access and safety for the individual upon move-in to the home, when they are not otherwise available to the member under Medi-Cal
- Other eligible move-in costs and allowable expenses identified by the MCP

4. How are Transitional Rent and Housing Deposits benefits being operationalized by DMH?

Implementation of Transitional Rent and Housing Deposits by DMH is currently on hold and applications are not being accepted at this time. Programs should use BHSA HI funds to support all BHSA HI allowable housing services until further notice. More information regarding the operationalization of Transitional Rent and Housing Deposits by DMH, including launch date and procedures, will be shared with DMH administrative teams and service providers as soon as it becomes available.

5. Once operational, how do I know whether a specific housing service or client is covered under Transitional Rent or Housing Deposits benefits?

DMH has created a reference chart to assist in determining whether a housing service is a covered Transitional Rent or Housing Deposits benefit: [BHSA Allowable Housing Interventions and Key Requirements](#). If coverage is confirmed, the program must also confirm that the client meets all other Medi-Cal MCP eligibility requirements before an application packet can be submitted. See the [BHSA Housing Interventions Eligibility and Documentation Checklist](#) for list of MCP eligibility requirements for Transitional Rent and Housing Deposits.

6. What criteria must a DMH client meet in order to be eligible for Transitional Rent or Housing Deposits benefits?

DMH clients eligible to receive BHSA HI services will meet the first two **Transitional Rent** requirements of (1) meeting the access criteria for Specialty Mental Health Services and (2) experiencing or being at risk of homelessness. The remaining requirement for Transitional Rent is that the client meet one of the following:

- Be a part of one of the following Transitional Populations:
 - Transitioning out of interim housing;
 - Transitioning out of a carceral setting;
 - Transitioning out of recuperative care or short-term post-hospitalization housing;
 - Transitioning out of foster care;
 - Transitioning out of an institutional or congregate residential setting;
- OR be experiencing unsheltered homelessness;
- OR be eligible for a Full-Service Partnership (FSP) program.

Clients who are eligible for Transitional Rent are also automatically eligible for **Housing Deposits**. Even if they do not qualify for Transitional Rent, DMH clients who meet the access criteria for Specialty Mental Health Services and are experiencing or at risk of homelessness may also be eligible for Housing Deposits.

For a broader list of eligible populations for [Transitional Rent](#) and [Housing Deposits](#), see the BHSA Housing Interventions Definitions.

7. Can a member of any Medi-Cal MCP be eligible for Transitional Rent or Housing Deposits benefits?

While a client does need to be a member of a Medi-Cal MCP in order to be eligible for Transitional Rent or Housing Deposits, not all MCPs offer these benefits or contract with the County to provide reimbursement for these benefits. See the [BHSA HI Eligibility and Documentation Checklist](#) for further details on the MCPs that have these exceptions. In these instances, BHSA HI funds may be used to cover the related expenses as long as the client and service are both BHSA HI eligible.

8. What will the workflow look like for referring clients to Transitional Rent or Housing Deposits benefits?

See current established workflow for accessing Transitional Rent and Housing Deposits benefits and confirming eligibility: [BHSA Housing Interventions Workflow for DMH Programs](#). At this time, DMH clients cannot be referred to a Medi-Cal MCP directly for Transitional Rent or Housing Deposits benefits. Rather, an application packet must be submitted to the DMH Housing Division, which will be responsible for administering Transitional Rent and Housing Deposits for the Department including reviewing application packets and sending them to the Department of Homeless Services and Housing (HSH) for processing and submission to the MCP.

9. If a Transitional Rent or Housing Deposits application packet is submitted for my client, do I need to wait for approval from the Medi-Cal MCP before my client can access the housing service they need?

DMH clients are not required to obtain Medi-Cal MCP approval before accessing a housing service that may be covered under Transitional Rent or Housing Deposits since both Transitional Rent and Housing Deposits work on a reimbursement basis. Instead, service providers may use BHSA HI funds up front to pay for the housing service as long as the client and service are both BHSA HI eligible. DMH will then apply for reimbursement from the MCP at the administrative level if/when the client is approved.

10. What is my responsibility as a service provider as it relates to Transitional Rent and Housing Deposits?

DMH service providers, such as case managers and housing coordinators, are responsible for helping determine whether a client is required to apply for Transitional Rent and/or Housing Deposits benefits and supporting them through the application and authorization process. This includes:

1. Identifying the client's housing needs and determining whether Transitional Rent, Housing Deposits or both may apply.
2. Confirming whether the client is a member of a Medi-Cal MCP.
3. Discussing with the client whether they may be eligible for Transitional Rent/Housing Deposits and explaining why an application packet may be required.
4. Working with the client to complete and submit a Transitional Rent/Housing Deposits application packet and all supporting documentation to the DMH Housing Division within 3 business days of entering housing.
5. Responding promptly to requests from the DMH Housing Division for additional information or corrections during the application review process.
6. Coordinating with the DMH Housing Division and HSH as necessary during the Transitional Rent/Housing Deposits authorization process with the MCP.
7. Supporting the client to locate and transition to a new housing setting, as applicable.
8. If the client is approved, ensuring an Exit Summary Form - along with any other documentation required by the MCP - is collected and submitted to the Housing Division within 3 business days of the client exhausting their TR allowance or exiting from housing.
9. 9. Planning with the client for the end of any Transitional Rent benefits.

11. What documentation needs to be submitted as part of my client's Transitional Rent or Housing Deposits application?

Each Medi-Cal MCP may have different documentation requirements for their Transitional Rent or Housing Deposits applications. However, in general, required documentation may include:

- MCP Service Authorization Request Form
- Housing Support Plan (only for Transitional Rent)
- Universal Consent Form
- CalAIM Community Supports Opt-In Form
- County Notification of Privacy Practices
- Housing Inspection Form/Report (only for Transitional Rent to confirm habitability)
- Executed lease (for permanent housing settings) or bed/room occupancy agreement or equivalent (for interim housing settings)

Once approved for Transitional Rent and/or Housing Deposits, additional documentation will need to be collected and submitted to the DMH Housing Division including:

- Exit Summary Form (only for Transitional Rent and upon exhaustion of Transitional Rent allowance or exit from housing)

12. Can my client contribute to the rent for their apartment while receiving Transitional Rent benefits?

No, even though it is standard practice for clients in Permanent Supportive Housing to pay 30% of their income toward rent, Transitional Rent prohibits Medi-Cal MCP members from contributing toward their rent obligations during the Transitional Rent benefit period.

13. What happens when Transitional Rent ends? What is Month 7?

For the Transitional Rent Service Authorization Requests Forms submitted by DMH, approval for Transitional Rent is dependent on DMH's commitment to provide a housing subsidy once the client's Transitional Rent benefits end. For DMH clients already using a DMH housing resource, they will be able to remain in their housing and the funding for the resource will change from Transitional Rent to BHSA HI or another funding source. This transition to another housing resource is referred to as "Month 7" since Transitional Rent benefits are exhausted after 6 months (182 days). However, it is important to understand that Month 7 may not necessarily correspond to the client being in housing for seven months since Transitional Rent benefits do not have to be used consecutively.

14. How do I plan for the end of Transitional Rent benefits with my client in Permanent Supportive Housing?

Individuals are not allowed to pay rent while receiving Transitional Rent benefits. DMH service providers should explain that to their clients and that they will be required, if applicable, to begin contributing toward rent once the Transitional Rent period is over. DMH service providers should begin planning discussions with their clients at least 60 days before their Transitional Rent benefits end and work with their client and other involved housing service providers to ensure they understand their upcoming payment obligations and develop a plan for covering the new expense. Even if the client will not have a rental contribution, service providers should discuss the transition with their client and explain any ongoing responsibilities or new requirements associated with their housing subsidy. Early planning is important to help prevent any missed rental payments or other potential impacts to housing stability.

15. My client did not use all six months of their Transitional Rent benefits. Can they re-apply?

Yes, Transitional Rent benefits do not need to be used continuously and may be split between different housing episodes, with the client needing to re-apply each episode. However, coverage remains limited to a total of six months (182 days) across all housing episodes.

16. When may Transitional Rent benefits not be available to a Medi-Cal MCP member?

Transitional Rent benefits may not be available to Medi-Cal MCP members in the following situations:

- When the member does not have a Housing Support Plan.
- When the member will not have access to an ongoing subsidy when the Transitional Rent period ends.
- When the housing setting is not eligible under CalAIM Community Supports, such as when the member is staying at a motel/hotel used as short-term emergency shelter or entering licensed residential care.
- When the rate exceeds the Medi-Cal reimbursable ceiling percentage of Small Area Fair Market Rent (SAFMR).

- When the member has exhausted their Transitional Rent benefits through previous housing episodes, meaning they have already received 182 cumulative days of Transitional Rent, Recuperative Care or Short-Term Post-Hospitalization housing during a rolling 12-month period within the five-year demonstration period.
- When the member declines services.

17. Can Transitional Rent benefits be used for hotel or motel stays?

It depends. In Los Angeles County, DMH has determined that hotels and motels that are used as short-term emergency shelter are not eligible for Transitional Rent as we are unable to commit to continuing the rental subsidy when the Transitional Rent benefits are exhausted. However, Transitional Rent may be used for hotel or motel stays where the hotel or motel has beds dedicated for DMH clients.

18. Can my client receive both Transitional Rent and Housing Deposits benefits?

Yes, when the client meets eligibility requirements for both benefits. Clients may also receive both Transitional Rent and Housing Deposits simultaneously; however, Housing Deposits cannot cover services included under Transitional Rent.

19. If my client is approved for Transitional Rent or Housing Deposits benefits, will all of their housing-related needs be covered by the Medi-Cal MCP?

Not necessarily. Housing services covered under Transitional Rent and Housing Deposits must meet Medi-Cal MCP eligibility criteria and exactly which services are covered may vary from MCP to MCP. In cases where some needed housing services are not covered by the client's Transitional Rent or Housing Deposits benefits, BHSA HI funds may be used to cover these expenses given that the services are BHSA HI allowable.

20. What happens if my client's Transitional Rent or Housing Deposits application is denied?

If the Medi-Cal MCP does not approve the client's Transitional Rent or Housing Deposits application, the client does not automatically lose the housing service that they were approved for. By pursuing the applicable benefit, DMH has satisfied the requirement to seek available MCP coverage and may use BHSA HI funding to cover the housing service given that the client is BHSA HI eligible and the service is BHSA HI allowable.

21. My client does not want me to submit the MCP Service Authorization Request Form for Transitional Rent or Housing Deposits. What do I do?

If a client is declining to apply for Transitional Rent or Housing Deposits, the refusal must be documented on the CalAIM Opt-In Form. This form must be sent to the DMH Housing Division at dmhcsapps@dmh.lacounty.gov noting the client's refusal. Additionally, the DMH Service Provider must document the client's refusal in their electronic health record. When a client refuses to opt-in to the benefit, the DMH service provider is no longer obligated to apply for these benefits and, as long as the client is BHSA HI eligible and the service is BHSA HI allowable, BHSA HI funds can be used to pay for the needed housing service.

22. I supported my client in applying for Transitional Rent and/or Housing Deposits benefits in their prior housing setting; however, my client recently lost their housing. How would I know whether they need to re-apply for Transitional Rent and Housing Deposits benefits when they move into their next housing setting?

Transitional Rent benefits may be requested again if the client has not yet exhausted their six months (182 days) of benefit coverage, even if a previous request for Transitional Rent to support their prior housing setting was denied. Housing Deposits is a one-time benefit that may also be requested again, but the application must include documentation of what conditions have changed and demonstrate why providing this benefit a second time would be more successful. Approval of all Transitional Rent and Housing Deposits requests are at the discretion of the Medi-Cal MCP.

BHSA Housing Interventions Definitions

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Los Angeles County Department of Mental Health

Behavioral Health Services Act Housing Interventions

Definitions

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A. Types of Homelessness

1. At Risk of Homelessness *(BHSA Policy Manual Appendix A: Select Definitions, Version 1.5.0 – June 2026, pages 236-237)*

1. An individual or family who:

- a.** Does not have sufficient resources or support networks, e.g., family, friends, faith-based or other social networks, immediately available to prevent them from moving to an emergency shelter or another place described in Section A.2.1 of the "Experiencing Homelessness" definition; and
- b.** Meets one of the following conditions:
 - i.** Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance;
 - ii.** Is living in the home of another because of economic hardship;
 - iii.** Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 30 days after the date of application for assistance;
 - iv.** Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by federal, state, or local government programs for low-income individuals
 - v.** Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the U.S. Census Bureau;
 - vi.** Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or
 - vii.** Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient's approved consolidated plan.

- c. A child or youth who does not qualify as "homeless" under this section, but qualifies as "homeless" under section 387(3) of the Runaway and Homeless Youth Act (34 U.S.C. 11279(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (34 U.S.C. 12473(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(l) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(l)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or
- d. A child or youth who does not qualify as "homeless" under this section but qualifies as "homeless" under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

2. Experiencing Homelessness: *(BHSA Policy Manual Appendix A: Select Definitions, Version 1.5.0 – June 2026, pages 234-235)*

- 1. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
 - a. An individual or family with a primary night-time 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;
 - b. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - c. An individual who is exiting an institution and was considered homeless immediately prior to entering the institution or becomes homeless during the institutional stay, regardless of the length of stay.
- 2. An individual or family who will imminently lose their primary nighttime residence, provided that:
 - a. The primary night-time residence will be lost within 30 days of the date of application for homeless assistance;
 - b. No subsequent residence has been identified; and
 - c. The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing.

- 3.** Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
 - a.** Are defined as homeless under section 387(3) of the Runaway and Homeless Youth Act (34 U.S.C. 11279(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (34 U.S.C. 12473(6)), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(l) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(l)), section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)), or section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2));
 - b.** Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
 - c.** Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
 - d.** Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment.
- 4.** Any individual or family who:
 - a.** Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;
 - b.** Has no other residence; and
 - c.** Lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, to obtain other permanent housing.

3. Chronically Homeless: *(BHSA Policy Manual Version 1.5.0 – June 2026, Appendix A: Select Definitions, page 237)*

1. A homeless individual with a disability as defined in section 401, subdivision (10) of the McKinney-Vento Assistance Act (42 U.S.C. 11360(10)), who:
 - a. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter, and
 - b. Has been homeless as defined under BHSA Policy Manual Section [7.C.4.1.1 Experiencing Homelessness and At Risk of Homelessness](#) on any number of occasions in the last 3 years, as long as the combined occasions equal at least 12 months; or
2. An individual who is exiting an institution and met all of the above criteria in Section A.3.1 immediately prior to entering the institution regardless of the length of stay; or
3. A family with an adult head of household (or, if there is no adult in the family, a minor head of household) who meets all of the criteria in Sections A.3.1 or A.3.2 above, including a family whose composition has fluctuated while the head of household has been homeless.

4. Encampment: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.4.1.3 People in Encampments, page 182)*

1. The BHSA definition for encampment is in alignment with the Department of Housing and Urban Development (HUD) definition. An encampment includes the following:
 - a. A group of people sleeping outside in the same location for a sustained period.
 - b. The presence of some type of physical structures (e.g., tents, tarps, lean-to's).
 - c. The presence of personal belongings (e.g., coolers, bicycles, mattresses, clothes).
 - d. The existence of social support or a sense of community for residents.

B. Eligible Populations for Transitional Rent: *(DHCS Community Supports Policy Guide: Volume 2, April 2025, pages 57-60) ([Back to FAQs](#))*

1. Subject to the six-month global cap on Room and Board services. The six months of Transitional Rent are not required to be continuous.

2. Clinical Risk Factor Requirement: Must have one or more of the following qualifying clinical risk factors:
 - a. Meets the access criteria for Medi-Cal Specialty Mental Health Services (SMHS);
 - b. Meets the access criteria for Drug Medi-Cal (DMC) or Drug Medi-Cal Organized Delivery System (DMC-ODS);
 - c. One or more serious chronic physical health conditions;
 - d. One or more physical, intellectual, or developmental disabilities; or
 - e. Individuals who are pregnant up through 12-months postpartum.
3. **AND** Social Risk Factor Requirement: Experiencing or at risk of homelessness.
4. **AND** Individual must meet one of the following requirements:
 - a. Transitioning Population Requirement: Must be included within one of the following transitioning populations:
 - i. Transitioning out of an institutional or congregate residential setting: 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.
 - ii. Transitioning out of a carceral setting: 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.
 - iii. Transitioning out of interim housing: 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.
 - iv. Transitioning out of recuperative care or short-term post hospitalization housing: 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.

- v. 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.
- b. **OR** 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;
- c. **OR** 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.

C. Eligible Populations for Housing Deposits: *(DHCS Community Supports Policy Guide: Volume 2, April 2025, pages 32-33)* [\(Back to FAQs\)](#)

1. Individuals who meet the following social and clinical risk factor requirements:
 - a. Social Risk Factor Requirement: Experiencing or at risk of homelessness
 - b. Clinical Risk Factor Requirement: Must have one or more of the following qualifying clinical risk factors:
 - i. Meets the access criteria for SMHS;
 - ii. Meets the access criteria for DMC or DMC-ODS;
 - iii. One or more serious chronic physical health conditions;
 - iv. One or more physical, intellectual, or developmental disabilities; or
 - v. Individuals who are pregnant up through 12-months postpartum.
2. **OR** Individuals who are determined eligible for Transitional Rent. These individuals are automatically eligible for Housing Deposits.
3. **OR** Individuals who are prioritized for a permanent supportive housing unit or rental subsidy resource through the local homeless Coordinated Entry System or similar system designed to use information to identify highly vulnerable individuals with disabilities and/or one or more serious chronic conditions and/or serious mental illness, institutionalization or requiring residential services because of a substance use disorder and/or is exiting incarceration.

D. Time Limited Interim Settings

- 1. Non-Congregate Interim Housing:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3 Allowable Settings, page 193)*
 - a. Three or less unrelated individuals per room depending on size and privacy configurations.
 - b. Can include Single Room Occupancy (SRO) settings being utilized as interim housing.
- 2. Congregate Interim Housing:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3 Allowable Settings, page 193)*
 - a. Four or more individuals per room and sufficient common space.
 - b. Does not include behavioral health residential treatment settings.
- 3. Motel/Hotel Stays:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3 Allowable Settings, page 193)*
 - a. Cited as an allowable time-limited interim setting per BHSA Policy Manual.

E. Non- Time- Limited Permanent Settings

- 1. Rental Subsidies:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.1 Rental Subsidies, pages 190-192)*
 - a. Inclusive of rental assistance for multiple types of permanent housing settings including apartments, single and multi-family homes, mobile homes and accessory dwelling units (ADUs).
 - b. Must be issued directly to the property owners, managers, or providers contracted to administer BHSA-funded rental assistance.
 - c. Can include either scattered-site or project-based assistance.
- 2. Licensed Residential Care:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3.4 Assisted Living, page 198)*
 - a. Inclusive of Adult Residential Facilities (ARFs) and Residential Care Facilities for the Elderly (RCFEs) also known as Board and Cares or Assisted Living Facilities.
 - b. Such facilities provide 24/7 care to people who require it due to cognitive impairment or inability to perform activities of daily living (ADLs), along with room and board.

3. License-Exempt Room and Board: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3.4 Assisted Living, page 198)*

- a. Settings eligible for coverage that serve populations with significant needs but are license-exempt due to not providing 24/7 care and supervision.

4. Sober Living Homes: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3.3 Recovery Housing, pages 197-198)*

- a. Sobriety-oriented housing.

5. Single Room Occupancy: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3 Allowable Settings, page 194)*

- a. One person per room and typically has shared common spaces including bathrooms.

6. Shared Housing: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.3.2 Shared Housing, pages 196-197)*

- a. When more than one person or household agrees to share a housing unit. Each person (or couple as they choose) must have their own bed and locked cabinet/bureau.

7. Master Leasing: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.1.3 Master Leasing, pages 192-193)*

- a. A legal agreement through which a master tenant (the county or its subcontracted provider) leases a unit or multiple units from a property owner and then subleases units to subtenants.

F. Other Housing Supports – Landlord Outreach and Mitigation

1. Damage Reimbursement: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.1 Landlord Outreach and Mitigation Funds, pages 200-201)*

- a. Damage reimbursement outside of usual wear and tear.

2. Eviction Prevention: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.1 Landlord Outreach and Mitigation Funds, pages 200-201)*

- a. May include financial assistance, mediation, tenant education, legal costs and connection to resources (if necessary) for someone to maintain their housing or be relocated.

G. Other Housing Supports – Participant Assistance Funds

- 1. ID/Document Costs:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 201)*
 - a. Costs associated with obtaining government-issued identification and other vital documents.
- 2. Housing Application Fees:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 201)*
 - a. Charges for processing rental applications.
- 3. Credit Report Fees:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 201)*
 - a. Costs associated with pulling credit reports in order to access permanent housing.
- 4. Security Deposits:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 201)*
 - a. A payment required by an owner to be held during the term of the lease (or the time period the tenant occupies the unit) to offset damages incurred due to the actions of the tenant. Such damages may include physical damage to the property, theft of property, and failure to pay back rent. Forfeiture of the deposit does not absolve the tenant of further financial liability.
- 5. Utility Deposits:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 202)*
 - a. Funds used to set up essential utilities (electricity, water, gas) when an individual is transitioning into new housing.
- 6. Storage Fees:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 202)*
 - a. Costs that pay for the secure, temporary storage of personal belongings.
- 7. Move-In Costs - Furniture:** *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 202)*
 - a. Moderate furnishings including, but not limited to, items such as a bed, table, and chairs. Also includes cleaning tools and other supplies that people need to settle into housing.

8. Move-In Costs - Transportation: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 202)*

- a. Transportation-related fees associated with moving into a new unit such as a moving truck or movers.

9. Pet Deposits/Other Pet Costs: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, page 202)*

- a. A pet deposit is one-time payment required at the start of a lease and held by the landlord to cover potential property damage caused by a pet. If no damage occurs, this money is returned at the end of tenancy. Other pet costs may include temporary pet boarding, recurring monthly pet fee added to the base rent, or one-time non-refundable pet fees paid at move-in for allowing a pet to reside in the unit.

10. Rent Arrears: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, Page 201)*

- a. Back rent or past-due rent payments.

11. Utility Arrears: *(BHSA Policy Manual Version 1.5.0 – June 2026, Section 7.C.9.4.2 Participant Assistance Funds, Page 201)*

- a. Past-due, unpaid utility bills (such as electricity, water, gas, and trash) that prevent an eligible participant from establishing or maintaining permanent housing.