



IMPLEMENTATION

Nevada Medicaid has added housing support services to what can be covered by Managed Care Organizations with Medicaid funding. The hope is that enhanced funding will expand coverage for housing support and meal services.



Plans already cover some housing supports with their own profits as [value-added benefits](#). Some have even purchased property for housing.

COVERED SERVICES

Rent is NOT covered. However, Managed Care Organizations that choose to offer housing supports will work with local governments and community organizations to identify sources of financing for room and board for eligible members. **Housing-related services covered by Medicaid:**

- Specialized case management
- Deposits
- Housing sustainment services
- Meals
- Housing transition supports

LET'S GET STARTED

Nevada Medicaid is leading the effort to get these initiatives up and running in early in 2025. Join the email list to stay informed, provide feedback, or express interest in providing these services by sending an email to ManagedCare@dhcfp.nv.gov.

Get E-mail notifications
[dhcfp.nv.gov/Resources/
NevadaMedicaidUpdate/](mailto:dhcfp.nv.gov/Resources/NevadaMedicaidUpdate/)



Go to the web page
[dhcfp.nv.gov/Pqms/Hou
sing/HousingSupports/](https://dhcfp.nv.gov/Pqms/HousingSupports/)



GOAL: Housing Supports and Services fulfill Medicaid's mission by reducing taxpayer costs through providing preventative measures that ultimately reduce members' reliance on more expensive services such as:

- Emergency transportation and emergency room use for behavioral health crises
- Skilled nursing facilities
- Crisis intervention
- Neonatal care

ELIGIBILITY: Only members in urban Clark and Washoe counties will qualify, but that will change in 2026 with the implementation of Statewide Managed Care. Over 20,000 Nevadans are anticipated to qualify. Members are eligible if they are homeless or at risk of, and/ or experience:

- Mental illness
- Domestic violence
- Human trafficking
- Emotional disorder
- Substance use
- At risk of institutionalization
- Pregnant or recently gave birth (within 60 days)
- Risk of using emergency services due to behavioral health crisis
- Recently released from a correctional/medical facility (last 90 days)
- Transitioning in the next 30 days

PROVIDER ACCOUNTABILITY: Managed Care Organizations must use:

- A consistent process for screening eligibility
- Qualified providers to document eligibility
- Local governments & entities to identify funding sources to cover rent when appropriate
- Assessments without bias in a manner that is culturally & linguistically appropriate

PLEASE NOTE: *This is not intended to be comprehensive official guidance. Refer to the ILOS Amendment published on the website or email ManagedCare@dhcfp.nv.gov.*