

2026 Recovery Voucher (RV) Grant Program Administrator

Frequently Asked Questions

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Client Eligibility & Status While in the Program

1. In order to be eligible for the program, does an individual have to have been diagnosed with OUD (opioid use disorder) within the past 12 months or does the 12-month rule only apply to having received treatment?

In order have an eligible OUD classification, the individual needs:

- To have an OUD diagnosis (not time dependent)
- OR
- Record of receiving OUD treatment within the past 12-months (time dependent)

Agencies will also need to be able to document client OUD eligibility per the guidelines in the Program Manual (available on the [DEHCR website](#)).

2. For a potential client to be eligible does OUD need to be the primary diagnosis the client has or the primary reason the client is in treatment?

No, OUD does not need to be a potential client's primary diagnosis, nor does it have to be the primary reason they are getting treatment. However, for the potential client to be eligible they do need to have either received an OUD diagnosis at some point (doesn't have to be current, not time dependent) or they must have received OUD treatment within the past 12-months (can be along with treatment for other substances, or conditions).

3. If a person overdoses on a substance that isn't an opioid but is laced with an opioid (example: fentanyl) and is treated in the Emergency Room, does this count as having received treatment for OUD?

It **does not automatically count** as having received treatment for OUD. It will only count as treatment for OUD **IF** the provider codes the treatment as having been for OUD.

4. What certifications or requirements do behavioral health providers need to be able to certify a client has either received opioid use disorder (OUD) treatment within the past 12 months or has an OUD diagnosis?

The provider (or their representative, staff, office assistant, records staff etc.) would need to work for a legitimate organization and would need to be able to certify they have seen documentation the client

has an OUD diagnosis or has had treatment for OUD within the past 12 months. They do not have to be the ones who provided the treatment, nor do they have to offer OUD treatment themselves or have done so in the past. They also do not have to send the documentation they have seen to the RV Administrator. It is enough for them to certify they have seen it.

An example of a situation that would be allowable is, if a Licensed Clinical Social Worker (LCSW) or their staff (working at a legitimate organization) is willing to certify they have seen documentation the client has an OUD diagnosis or has been treated for OUD in the past 12 months. This could either be confirmed through a signed note from the LCSW or their staff, or through a documented phone call with release of information that is signed by the RV Administrator making the call (requires signed consent from the potential client if the potential client is not on the call).

5. Are people already staying in a recovery residence eligible for the RV program?

It depends. For a client to be eligible for this program they must meet the 2 criteria:

1. Have documentation of having an OUD diagnosis or having had treatment for OUD within the past 12-months.
- AND
2. Be experiencing either category 1, 2, 3 or 4 HUD defined homelessness (category 3 is new starting in 2024) on the day they enter the RV program.

If the client can meet both of the eligibility criteria, the client (and their family, if applicable) is eligible to be supported. A common eligible scenario for clients already staying in a recovery residence is:

The client has been staying at a recovery residence for alcohol addiction but was diagnosed with OUD in the past. The client will lose their bed within 14 days and lacks the resources and support system to find permanent housing on their own and prevent homelessness. In this instance, the client meets the criteria by having an OUD diagnosis (not time dependent) and meeting the criteria for category 2 homelessness (imminent risk of homelessness).

- Note, the recovery residence will need to issue a letter stating when the client will be asked to leave with a specific date in order for the RV Administrator to confirm the client meets the timing requirements for category 2 homelessness. It is not enough for the recovery residence to state the client is behind in paying rent or will be asked to leave.

This is an example of a common eligible scenario and not the only eligible scenario. More details about acceptable OUD documentation, definitions of HUD Homelessness categories and requirements to document each category can be found in the Program Manual or on the [DEHCR website](#).

6. Are RV clients staying in a recovery residence considered homeless?

Yes, with certain caveats. Similar to Rapid Re-Housing clients (funded through the Emergency Solutions Grant), RV participants won't be counted in Continuum of Care (CoC) Point-In-Time counts as homeless while staying at a recovery residence. However, for the purposes of applying to HUD-VASH and CoC funded permanent supportive housing, the time the client spends in a recovery residence will be counted as time the client was homeless.

If the client was homeless immediately prior to entering the recovery residence and it has been 90 days or less, at exit from the recovery residence the client will meet the criteria for category 1 homelessness (literally homelessness). In this instance the recovery residence is being considered an institution.

7. Is someone who was homeless eligible for the program?

No. In order to be eligible for the RV program, the client must be homeless (meet one of the definitions of homelessness 1, 2, 3, or 4) on the day they enter the RV program. It is not sufficient for the client to have been homeless at some point before. They must be homeless when they enter the program.

It is recommended clients be entered into the RV program as soon as they meet both eligibility criteria, homelessness 1, 2, 3 or 4 and have documentation of OUD eligibility, instead of waiting for a spot in a recovery residence to open and then entering them. This way, there is not the risk the clients' eligibility will change in the interim and the RV program will not be able to support their stay in the recovery residence once the spot is found.

Recovery Residence Co-Payments

8. Are clients allowed to self-pay the difference between the RV Maximum Allowable Rate and what the recovery residence actually charges?

No, the client is not allowed to pay any portion of the costs for their stay in the recovery residence at any time.

If there is a good case to be made for why the RV Maximum Allowable Rate should be waived for a certain client at a particular recovery residence, DEHCR will consider waivers on a case-by-case basis. Please reach out to the Grant Specialist (Daniel.Duquette@wisconsin.gov) for additional information.

9. Is it allowable to gradually have the client start paying a portion of the cost of the recovery residence (example: 0% client paid/100% RV Administrator paid for the first 3-months, then 25% client paid/75% RV Administrator paid in month 4-6, etc.)?

No. The RV program should be paying the full cost of the recovery residence bed for as long as the client is in the RV program.

Recovery Residence Room/Unit Guidelines

10. Will the RV grant only cover a client's stay in a standard room (2 beds to a room) or are other types of rooms or units allowable?

The standard for singles is a two bedroom. However, RV Administrators are allowed to approve different configurations if they think it is in the best interest of the client. They will have to sign paperwork providing rationale for approving a room outside of the standard. The 2024 Recovery Residence Program Compliance Documentation Form for singles can be used for this.

Families don't have a standard given the range of variables they present (family size, ages of members, etc.). Given this, RV Administrators will have to provide rationale for approving the room/housing arrangement when placing a family. The 2026 Recovery Residence Program Compliance Documentation Form for families can be used for this.

There are two RV Maximum Allowable Rates, one for single clients and one for family clients. The maximum amount the RV grant will pay for a bed/unit remains the same regardless of the bed/unit type. See the [next](#) section for more details. In addition to being under the appropriate RV Maximum Allowable Rate, the rate the RV grant is charged must also be the best rate the recovery residence offers.

RV Rates, Past Due Rent, Holding Fees & Security Deposits

11. What is the RV Maximum Allowable Rate?

The RV Maximum Allowable Rate is the highest rate the RV program will pay to support a client type in a recovery residence on a monthly basis. The rate is based on [HUD Fair Market Rates \(FMR\)](#) in the area where the recovery residence is located. There are separate rates for singles and families.

The RV Maximum Allowable Rate for singles is:

$$\text{Efficiency FMR} * 75\% * 135\% = \text{RV Maximum Allowable Rate for Singles}$$

The RV Maximum Allowable Rate for families is:

$$\text{Efficiency FMR} * 135\% = \text{RV Maximum Allowable Rate for Families}$$

In addition to being at or under the RV Maximum Allowable Rate, the recovery residence will need to charge the RV program a rate that is the same or better than it charges all other clients (assisted or not).

If there is a good case to be made for why the RV Maximum Allowable Rate should be waived for a certain client at a particular recovery residence, DEHCR will consider waivers on a case-by-case basis. The requirement that the RV program be charged the best rates will not be waived, however. Please reach out to the Grant Specialist (Emily Bourne) for additional information.

12. What does the bed rate cover?

The RV program can cover the bed rate for a client to stay at a recovery residence. The bed rate can include the cost of a bed within a room plus standard utilities such as heat, water, electricity, gas, internet, and basic operations for running the recovery residence (bookkeeping, security, insurance, etc.). Standard utilities cannot include the cost of cable.

The RV program will not pay for any ancillary services such as case management, support groups, transportation during the client's stay, meals, activity fees, gym memberships, etc. It will also not pay for past due/back rent, or past due security deposits.

13. Does the unit type impact the RV Maximum Allowable Rate? Could it be calculated based on FMR for a 1-bedroom for a room with only 1 bed?

No. The maximum amount the RV program will cover for any unit is the applicable RV Maximum Allowable Rate. The unit type does not impact the applicable RV Maximum Allowable Rate. For example, say the RV Maximum Allowable for Singles ($\text{Efficiency FMR} * 75\% * 135\% = \100) is \$100, regardless of whether the client is sharing a room with one or two people, or whether the client has a room to himself, the maximum amount the RV program could pay for the bed would be \$100 (provided it also meets the requirement that this is the best rate the recovery residence offers any client).

If there is a good case to be made for why the RV Maximum Allowable Rate should be waived for a certain client at a particular recovery residence, DEHCR will consider waivers on a case-by-case basis. The requirement that the RV program be charged the best rates will not be waived, however. Please reach out to the Grant Specialist (Emily Bourne) for additional information.

14. How many months of past due bed fees/rent can be paid per client?

None. The RV program will not pay for any past due bed fees/rent or past due security deposits.

15. Can the RV program pay to hold a bed for a client?

It depends. The RV program cannot pay to hold a bed for a client before the client moves into the recovery residence (example: paying until the client is ready to move into the recovery residence).

If the client has already moved into the recovery residence, and then goes missing, the recovery residence can choose to hold the client's bed (however they are not required to hold the bed) and the RV program will continue to pay for the bed up to 30 days while it is determined where the client is, and whether it is appropriate for the client to come back to the recovery residence.

16. What costs can be taken out of the security deposit at the end of a client's stay? Who should the security deposit be returned to at the end of the client's stay?

Depending on the situation, the security deposit should either be returned to the client or the RV Administrator. Please see the table below for a description of potential situations, and directions for returning the security deposit.

Situation	Directions for Returning the Security Deposit
The client has moved into the recovery residence and is <u>now moving out of the recovery residence and leaving the RV program.</u>	The recovery residence should try to return the security deposit to the client for <u>30 days</u> . After <u>30 days</u> the security deposit must be returned to the RV Administrator.
The client has moved into the recovery residence and is <u>now moving to another recovery residence and is staying in the RV program.</u>	The recovery residence must return the security deposit to the RV Administrator.
<u>The client never moved into the recovery residence</u> , but a security deposit was paid.	The recovery residence must return the security deposit to the RV Administrator.

Please alert the recovery residence whether the client is switching to another recovery residence or leaving the RV program.

Non-damage related charges cannot be taken out of the security deposit. If the recovery residence is claiming damages and not returning the full amount, they need to provide the RV Administrator with an itemized list of those damages.

Inspections

17. When do inspections need to take place?

As a part of the process of assessing and selecting an appropriate recovery residence for a client, the RV Administrator would inspect the recovery residence before the client moves into it to determine if the recovery residence provides a safe, healthy, home-like environment to support the residents' active recovery. If the RV Administrator completes a Multiple Recovery Residence Stay Agreement with a client, all recovery residences need to be inspected prior to the client moving into any recovery residence covered by the agreement.

18. What does the inspection process entail?

The inspection process consists of the RV Administrator walking through the recovery residence and completing the Recovery Residence Inspection form as well as speaking with the recovery residence representative to gather information on how the recovery residence will support the client's active recovery. Based on the recovery residence passing both the RV Inspection and the discussion with the recovery residence, representative, the RV Administrator would determine if the recovery residence met the outlined criteria.

19. How often do inspections need to take place?

Once a client is placed in a recovery residence, the recovery residence needs to be reinspected every 12

months.

20. What happens if a recovery residence does not pass a reinspection?

Depending on the severity of the issue, the RV Administrator can choose to keep the client in recovery residence if the issue can be addressed quickly (within two weeks) and does not pose a serious threat. If a serious threat is identified, the client must be moved within 30 days, preferably before. The RV program will only pay for an additional 30 days, after which the client will need to find an alternative funding source if they would like to remain in the recovery residence in question. DEHCR must be notified whenever a recovery residence does not pass reinspection. DHS must be notified whenever a serious threat is identified, or whenever an issue cannot be addressed quickly (within two weeks). RV Administrators must submit a formal complaint to DHS by completing the [Complaint Intake Survey, F-00607](#) or calling the toll-free number to file a complaint by dialing 800-642-6552 and leaving a voicemail, or emailing dhsdqametalhealthaoda@dhs.wisconsin.gov whenever a serious threat is identified, or whenever an issue cannot be addressed quickly (within two weeks).

Stay Agreements

21. When do Stay Agreements need to be signed?

Stay Agreements need to be signed before or no later than the day the client's stay begins to be supported by the RV program.

22. If a provider operates multiple recovery residences, do they need to complete a Stay Agreement for each one?

In this case, a Multiple Recovery Residence Stay Agreement can be completed covering all RV program eligible recovery residences within the provider's network. All recovery residences would need to be inspected prior to the client moving into any recovery residence covered by this agreement.

23. If a client is a "no show" (missing, unreachable, location unknown, etc.) is the recovery residence required to hold the client's bed for 30 days?

No, recovery residences are not required to hold a client's bed for 30 days. If the client has already moved into the recovery residence, and then goes missing (is unreachable, location unknown, etc.), the recovery residence can choose to hold the client's bed (however they are not required to hold the bed) and the RV program will continue to pay for the bed up to 30 days while it is determined where the client is, and whether it is appropriate for the client to come back to the recovery residence.

The RV program cannot pay to hold a bed for a client before the client moves into the recovery residence (example: paying until the client is ready to move into the recovery residence).

24. How frequently can a client switch recovery residences while in the program?

A client can move one time for a non-needs-based reason while in the RV program. One time covers the entire time a client is in the RV program, whether they have been served by multiple RV Administrators, or whether they took time off and returned to the program. Per program requirements, RV Administrators work closely with clients to find the best possible placement for the client at the time the client is placed. Allowing the client the flexibility to move once due to personal preference/not due to need enables the client to have agency over where they live once they are placed. This limit also applies to moves for clients who were placed using the multiple recovery residence locations process. A client could move an unlimited number of times if there is a legitimate need as determined by the RV

Administrator. RV Administrators are required to provide a policy covering the guidelines for moving recovery residences including a grievance/appeal procedure to the client at entry.

Administrators would be required to get signed receipt of this policy, like the RV Termination Policy. This policy would be provided to the client whenever a denial of a move is made as well.

Exit Interviews

25. When are exit interviews required?

Exit interviews are required every time a client leaves a recovery residence. If the situation does not allow for the client to be interviewed, the recovery residence must fill out a portion of the form to the best of their knowledge. Exit interview forms can be found on [DEHCR's website](#). There are separate forms for single clients and family clients.

Digital Signatures

26. Are digital signatures allowed? Sometimes it can be difficult or time consuming to meet with the client or with the recovery residence in person and complete all the necessary paperwork.

Yes, digital signatures are allowed through services such as [DocuSign](#).