(all criteria must be met) Patient has a serious psychiatric condition diagnosable on Axis I, or a dual diagnosis (MH with SA or ID) Active Treatment has occurred or has been offered and consistently refused. Active treatment includes, but is not limited to, groups, individual counseling, family intervention if indicated, collaboration with outside providers. Active medication management has occurred. Medications have been adjusted to therapeutic levels, or alternative trials have occurred with no improvement with prior trials. If patient is refusing medication, AR has been appointed and involved, and/or medication over objection has been initiated. Patient has no emergent acute medical needs, and is able to meet medical clearance criteria. High complexity (i.e. The patient meets criteria for Level 2 – Intensive Care as defined below): High acuity, high complexity Current lack of willingness or ability to participate in treatment Long-term, persistent or recurrent psychiatric difficulties Complex discharge issues (i.e., homelessness, lack of social support) Patient remains psychiatrically fragile and requires a level of support not currently available in the community. If all criteria are met, conference call will be scheduled to include representative from responsible CSB, Northern Virginia Regional Projects Office (NVRPO), and Northern Virginia Mental Health Institute. Date of Call: _____ Time of Call: _____ Participants: **CSB NVRPO NVMHI** Result of Call: **NVMHI Triage:** Approval of Regional Review and Consultation Team (RUG) for endorsement of transfer, pending medical clearance and bed availability as outlined in the bed management plan. Transfer request not approved Other Comments: Date Patient transferred (if approved):

Criteria for Insured Transfer to NVMHI