

BEHAVIORAL HEALTH & RECOVERY SERVICES REQUEST FOR TRANSFER

The following form is to be used when a program has made attempts to support client in current level of care, sought RTX consultation, implemented adjustments in treatment plan and it is determined that client would be better served in another level of care, or another program.

Date of RTX Consult:	BHRS RTX Team member:
Client Name:	Counselor:
*Attach current Treatment Pla	
Date(s) transfer of care initial	lly discussed with client:
Client preference/request:	
Recommended Placement Le	vel:
☐ Level 3.1 ☐ Level	3.3 □ Level 3.5 □ OP/IOP
□ Other:	
	en made? (list specific program(s) contacted):

Please read the BHRS protocol below addressing unplanned discharge and transfer of care.

Prior to any unplanned discharge, a consultation with RTX should occur. Exceptions to this include AWOL or immediate risk to staff, other clients, or physical environment.

Each Medi-Cal beneficiary is only entitled to 2 residential admissions per year. Unplanned discharges are strongly discouraged and are not in best interest of the client. A transition from one residential provider to another, without a gap in treatment, is considered a single episode by DHCS.

- 1) Every effort must be made by the provider to transfer the client. This includes, and is not limited to:
 - a. Provider call continue to serve client /hold client until a care coordination plan is put in place and executed by program staff and all coordinating parties.
 - b. Evidence of internal Clinical Director and/or Medical Director consultation by client counselor and the program staff
 - c. Obtain a complex case conference or consultation from BHRS or a BHRS Clinical Consultant to develop plan to retain and/or transfer client
 - d. Connect to the BHRS RTX, an IMAT Case Manager, Service Connect Case Manager, Drug Court Case Manager, or other relevant entity for support in retaining and/or transfer of client.
 - e. Proactive outreach to other appropriate providers to facilitate timely and smooth transition to another residential provider.
- 2) Provider shall submit an incident report to BHRS AOD for any unplanned discharge resulting in a break in residential care, and utilization of a residential treatment episode

BHRS shall review unplanned discharge incidents. In some cases, BHRS and provider may complete a root cause