

Idaho Home Outreach Program for Empowerment ID-HOPE

(A Division of Pioneer Health Resources)

890 N. Cole Road
Boise, ID 83704



1002 W. Sanetta Street
Nampa, Idaho 83651

Phone (208) 287-1738

Fax (208) 322-1029

adults
ID-HOPE assists individuals who are diagnosed with a mental illness, and who have no existing insurance (including Medicaid), meet their basic needs and improve their quality of life

Based on Critical Time Intervention Model

Utilizes Evidenced Based Practices

Specific Eligibility Criteria

Certified Peer Specialists

Minimal or No Existing Services

History and/or Risk of Hospitalization

Voluntary Participation - *9 mos.*

Nine Month Recovery Assistance

Participant Driven Recovery Plan

Supported Housing

Supported Employment

*not med mgmt/no psychiatrist
SOAR - expedited way of applying for SSI -*

answer in 30 days

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Referral Form

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Referring agency: _____

Referral Date: _____ Referral Time: _____

Contact name: _____

Telephone number: _____

Potential participant

Name: _____ Male _____ Female _____

English speaking: Y ___ N ___ Primary language _____

Address: _____

Telephone number: _____ Alternate telephone number: _____

Date of Birth: _____

Eligibility Criteria (check all that apply)

Diagnosis of a Serious Mental Illness (SMI) or Serious and Persistent Mental illness (SPMI)- (which include Schizophrenia, Bipolar, Major Depressive Disorder, PTSD, and Borderline Personality Disorder)

Age 18 or older

At least two (2) functional limitations (e.g., health, housing, behavioral health, social, vocational/educational, self-care, community and/or family)

Does not have Medicaid or other forms of insurance; minimal or no ability to self-pay for needed health, housing, and/or behavioral health services

Voluntary desire to participate in ID-HOPE

History and/or risk of hospitalization related to symptoms of mental illness

Minimal or no existing services to help stabilize in the community of choice

*While those with co-occurring substance use disorder diagnosis and those who are working on criminal justice charges will not be automatically refused, the priority focus of the ID-HOPE project is adults who are diagnosed with SMI or SPMI

Accepted for ID-HOPE: Yes ___ No ___

Approving Supervisor Signature _____ Date: _____ Time _____

If no, referred to: _____

ID-HOPE staff who took referral: _____