



Frequently Asked Questions

What is the H.O.P.E. Program about? H.O.P.E. is a federally funded grant, the goal of which is to prevent hospitalizations in the “highest risk patients” by enhancing adherence to their physician’s Plan of Care.

What does it cost? It does not cost your patients anything to participate.

How does it work?

1. Measurements may include blood pressure, pulse, weight, oxygen saturation, and glucose.
2. The data are wirelessly uploaded and create an electronic record.
3. H.O.P.E. telehealth nurses contact patients by telephone for outliers and, as sophisticated “health coaches,” support your Plan of Care (POC).
4. We ask that you set the acceptable values for each biometric in the POC.

How are patients identified and selected?

1. HMSA has provided a list of their highest risk patients.
2. You choose which of your patients who could potentially benefit from the program; you may also refer other patients from your practice.
3. Eligibility Criteria:
 - a. >1 hospitalization in past 12 months
 - b. Require some assistance with daily activities
 - c. Frequent medical office visits
 - d. >55 years of age
 - e. **Patients under Hospice care or with fatal cancer are ineligible.**

What happens to the data?

1. Patient data are stored on a HIPAA compliant web server.
2. Accessible by password; only H.O.P.E. staff and your office staff will have access to these records.
3. H.O.P.E. staff will fax you patient reports in time for the next office visit and in the event of outlier trends.
4. All data are de-identified and cannot be mined by either HMSA or CMS.

How much work is involved for my staff or me?

1. Decide which of your patients may benefit from the program.
2. Complete a one-page Plan of Care to set outlier values for each patient.
3. Your participation is truly voluntary. You can drop out at any time.

Furthermore, if you have any questions or suggestions, please call me at (808) 547-6208.

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