



THE ROLE OF THE GENETICIST IN THE PATIENT CENTERED MEDICAL HOME

Heartlands Clinical Services
Workgroup

Ad hoc Medical Home partners

WHAT IS THE ROLE OF CLINICAL GENETICS IN THE PATIENT-CENTERED MEDICAL HOME?

A Commentary from the Medical Home Workgroup of the Heartland Regional Genetics and Newborn Screening Collaborative

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Provisionally accepted, Genetics in Medicine



What is a PCMH?

- Initially, the medical home was referred to as a central location for archiving the child's medical record.
- Later the medical home moved away from the idea of a single locus for care to one that is patient-centered; focused on providing health services designed for the individual patient.



The seven joint principles of the PCMH

- Personal physician
- Physician directed medical practice
- Whole person oriented care – with patient engagement in their own care
- Care coordination and/or integration with clinical information systems that support high-quality care coordination
- Quality and safety
- Enhanced (superb) access to care
- Payment system supports the model



Several important questions continue to be debated such as

- “Who can be the medical home?”,
- “Who can serve in the role of a primary care provider?” and
- “What is the role of specialists/sub-specialists.”
- In this light, we have carefully considered one major question: What is the role of the medical genetics team (clinical geneticists, genetic counselors, etc.) in the PCMH?



Specialists and the PCMH

- The types of clinical roles that have been suggested that a specialist can assume include
 - Cognitive Consultation,
 - Procedural Consultation,
 - Co-manager with shared care
 - or Co-manager with principal care



Medical Home Neighbor

- To improve the PCP-Specialist interface through strengthening the primary care structure, the concept of the Medical Home Neighbor (PCMH-N) was developed.
- This development put forth innovations aimed at strengthening primary care that includes:
 - telemedicine,
 - integration of primary-specialty care,
 - and decision support and e-referral.



Is Clinical Genetics Unique?

- Genetic conditions are rare
- Often diagnosed in childhood, but require lifelong management.
- Due to the frequency of required genetics clinic appointments, often a unique bond develops between the family and the geneticist.
- Biochemical crises may result in emergency room visits and inpatient stays. In these cases, it is often the geneticist who is consulted for management recommendations.



Is Clinical Genetics Unique?

- Some genetic syndromes require close surveillance and serial laboratory tests or imaging. These conditions are more similar to the most complex and chronic conditions followed by other specialists.
- However, in genetics, almost all of the patients meet these criteria. Therefore, based on the unique nature of this specialty, geneticists may have a different role than that of a 'typical' specialty, related to the PCMH.



So what is the role of the geneticist in the PCMH?

- As we have investigated this question over for the past two years, we have identified at least seven roles that different clinical genetic practices self-report as the way in which their practice interfaces with the PCMH. These reported roles are:
 1. No role or interface
 2. Medical Home neighbor
 3. The geneticist as the Medical Home
 4. Educator of the PCP
 5. Consultant / provider of quaternary care
 6. Co-manager of medical home
 7. Supporter of a family-directed 'PCMH'



Want to know more?

For a more detailed description of these roles that a clinical geneticist may play in the PCMH, the reader is referred to a companion article that may be accessed at:

<http://www.heartlandcollaborative.org/work-groups/clinical-services/role-geneticist-medical-home>