# Options for Medical Care: What works for you?

Mark S. Korson, MD VMP Genetics

#### METABOLIC MEDICINE.... A BRIGHT FUTURE!

# Good reasons

- Expanding awareness of metabolic disease
- Improved diagnostic capabilities
- New treatment opportunities now and on the horizon

The metabolic patient population is growing, and...

#### A CRISIS IN METABOLIC CARE

Shortage of clinicians and other health professionals

- Inadequate number in practice
- Inadequate number in training
- Inadequate recruitment
- No suitable back-up by other specialty clinicians

# A CRISIS IN METABOLIC CARE

Poor education about metabolic disease

- Medical schools
- Post-graduate training programs

This situation does not bode well for the patient community or the physician community

# PHYSICIAN TYPES: Definitions

"Mitoknowledgeable" (*Mknow-MD*) Those with extensive expertise and experience in the diagnosis and management of mitochondrial disease

Very rare

#### PHYSICIAN TYPES: Definitions

"Mito-helpful" (*Mhelp-MD*)

Those with no expertise in mitochondrial disease, but will:

- Take on a complicated case
- Learn about the patient and the disease
- Talk with other clinicians
- Reach out to professional resources for information and assistance
- Learn about the patient and the condition over time

#### DETERMINING IF AN MD IS MITO-HELPFUL?

Are you able to...

- ... participate in my complex care?
- ... work with a team of MDs, if necessary?
- ... help me understand what MDs are saying and thinking about my condition?
- ... advocate for me with other providers?
- ... have your office help coordinate my care?

# **CARE OPTIONS: Definitions**

Conventional care

Face-to-face direct care in a health care facility

PATIENT ←→ METABOLIC MD

Telemedicine direct care

Long distance direct care
PATIENT ←→ METABOLIC MD

Telehealth MD:MD support

Long distance physician support LOCAL MD ←→ METABOLIC MD

#### CONVENTIONAL DIRECT CARE

- Patient is seen in a hospital clinical setting
- An *Mknow-MD* evaluates the patient directly, usually including a history and physical examination
- Other patient information is reviewed
- A clinical impression is developed.
   A list of recommendations is implemented by the patient + the *Mknow-MD*

# TELEMEDICINE DIRECT CARE

- An initial live evaluation is necessary to assess if long distance care is suitable
- Patient is at home; MD is at the office
- An Mknow-MD evaluates the patient visually. A history is obtained, no exam
- Other patient information is reviewed
- A clinical impression is developed. A list of recommendations is implemented by the patient + the Mknow-MD

#### TELEMEDICINE SECOND OPINIONS

- Patient is at home; MD is at the office
- An Mknow-MD reviews all patient information in advance then speaks to the patient/family. No physical exam.
- A clinical impression is developed. A list of recommendations is provided to the patient and implemented by the patient + the local provider
- Local provider may contact Mknow-MD for clarifications
- Many of these are one-time consultations

#### TELEHEALTH PHYSICIAN: PHYSICIAN SUPPORT

- Patient is evaluated locally by a local *Mhelp-MD* (PCP or specialist), including a history and exam
- The case is then discussed in full by *Mhelp-MD* with an *Mknow-MD*. Other patient information is reviewed
- The Mknow-MD discusses an impression with the Mhelp-MD; they co-develop a set of recommendations to be implemented by the Mhelp-MD + the patient

	CONVENTIONAL CARE	TELEMEDICINE	TELEHEALTH
Type of MD interacting with the patient	Mknow-MD	Mknow-MD	Mhelp-MD
Quality of hands-on metab/mito care	Highest	Close to highest	Lower
Patient access to a metab/mito physician	Lower	Potentially higher	Potentially highest
Cost	Insurance	Insurance	Insurance, contract between Mknow-MD + local facility

The current medical system is costly and in flux. Innovative care options are going to evolve.



# Thank You!

Mark S. Korson, MD

mkorson@vmpgenetics.com
www.vmpgenetics.com
404.793.7800 voice | 866.744.5665 fax