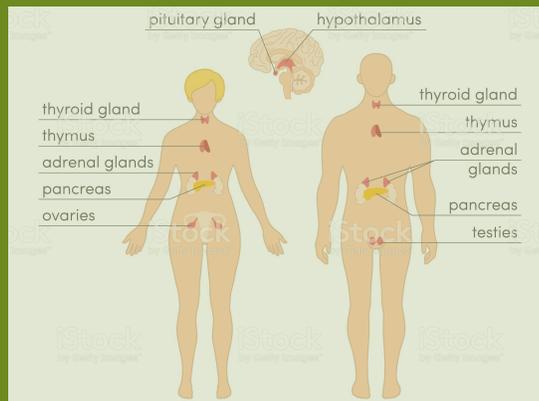




Successfully Integrating Medical Weight Loss into an Endocrinology Practice



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Introduction

In recent years, more doctors and clinicians have realized the critical role they play in the identification and treatment of obese and overweight patients. The shift toward clinical care of obesity is happening and gaining support at a rapid rate. Obesity has been identified as the root cause contributing to more than 59 health conditions, including cardiovascular disease, osteoarthritis, sleep apnea and cancer.

According to the CDC, more than one-third (36.5%) of U.S. adults are obese. Despite this obesity trend, some doctors feel ill-equipped to effectively treat obesity as a disease and are often uncomfortable having meaningful discussions about the health risks associated with obesity.¹

For endocrinologists, obesity can represent a significant factor in the health of their patients. Obesity is associated with several endocrine diseases, including common ones such as hypothyroidism and polycystic ovarian syndrome, to rare ones such as Cushing's syndrome, central hypothyroidism and hypothalamic disorders. The mechanisms for the development of obesity vary according to the endocrine condition. Some endocrine abnormalities are considered as causative factors for the development of obesity, whereas others are considered to be secondary effects of obesity and usually are restored after weight loss.³

Weight loss is a primary goal of therapy for endocrinologists in the care of overweight diabetic patients. Clinical studies demonstrate that therapeutic benefit rises with increasing weight loss, but that losses as low as 0.45–4 kg have positive effects on metabolic control, cardiovascular risk factors and mortality rates.⁴

This paper focuses on the experiences of Dr. Mary Arden-Cordone MD, a board-certified practicing Endocrinologist and Internist with a general endocrinology practice in Stamford, CT. After several years of concentrating on endocrinology and internal medicine, Dr. Arden-Cordone added-on a medical weight loss practice that turned into a thriving, well-integrated part of her overall practice. In addition to seeing significant returns within a short period of time, she found increased personal satisfaction and stress reduction in helping patients achieve better health through physician-directed, long-term weight loss.

¹ Beich, Sara N., et al. "National survey of US primary care physicians' perspectives about causes of obesity and solutions to improve care." *BMJ open* 2.6 (2012).

² Korbonits M (ed): *Obesity and Metabolism*. Front Horm Res. Basel, Karger, 2008, vol 36, pp 212-228 (DOI:10.1159/000115367)

³ Kokkoris, Panagiotis et al. Obesity and endocrine disease. *Endocrinology and Metabolism Clinics*, vol 32, Issue 4, 895 – 914 (DOI 10.1016/S0889-8529(03)00078-1)

⁴ Fujioka, K. (2010), Benefits of moderate weight loss in patients with type 2 diabetes. *Diabetes, Obesity and Metabolism*, 12: 186–194. doi:10.1111/j.1463-1326.2009.01155.x

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Where Dr. Arden-Cardone Started Out

Dr. Arden-Cordone earned her MD from New York University, School of Medicine and completed her residency and endocrinology training at New York Presbyterian Hospital, Columbia University. After starting her solo general endocrinology practice in 1995 in Greenwich CT, she relocated it to Stamford, CT, where she currently shares space and overhead costs with another general endocrinologist. Her practice is a demographically diverse one, ranging from upper to middle class patients, many of whom depend upon medical insurance. Because of the link between obesity and some endocrine disorders, Dr. Arden-Cordone developed a natural professional interest in effective weight management. After a few years, she became interested in reducing the daily stress of her schedule while maintaining or perhaps expanding her practice. Having experienced the challenges and frustrations of keeping her patients at a healthy weight, her interests turned toward helping to solve the obesity problem.

Where the Obesity Problem Led Her

Nearly every day in her practice, Dr. Arden-Cordone encountered obesity related issues:

- Diabetic patients who needed to, or wanted to lose weight
- PCOS patients who were gaining weight
- Overweight and obese patients seeking the cause of their weight gain
- Post-menopausal women gaining weight

The idea that seemed like a natural fit for Dr. Arden-Cordone's practice was medical weight loss. It was clear that many of her patients needed help losing weight, and it was also clear from decades of research that weight reduction has a direct positive impact on health. A modest 5 percent weight loss has been proven to reduce the health risks associated with obesity.

Dr. Arden-Cordone already had established strong relationships with her patients, and she knew they would trust her treatment recommendations for weight management and obesity. First she realized she needed to find a program that would provide her with the training and knowledge that would increase her confidence in delivering obesity care. She was also hoping to find a program that could potentially increase her revenue without significantly increasing her patient load. She was seeking more sanity in her schedule and greater stress reduction in her life.

After research and ruling out franchise programs that would require her to invest in stand-alone build-outs or that were too much of a cost burden, she found The Center for Medical Weight Loss (CMWL) in 2009 through an ad in a medical journal. The program seemed to offer what the weight loss franchises offered but with more flexibility and at significantly reduced costs. With CMWL, a non-franchise model, Dr. Arden-Cordone could easily add the medical weight loss practice onto her existing endocrinology practice without relocating. The program contained a large non-insurance component that would increase revenue without having to rely on reimbursement. Most importantly, the CMWL program offered the most robust medical weight loss training program and practice support services that would enable her to get up and running easily to start treating her patients. She attended the initial training seminar and she had found a viable partner and path for offering medical weight loss to her patients.

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Growing a Weight Loss Practice

Initially, Dr. Arden-Cordone publicized her new weight loss practice primarily through office signage and the front desk receptionist. She and/or her staff also attended various Women's Health Symposia, Fitness clubs, and other health-related gatherings to promote her practice. They would bring a scale with them to help spark conversations and recruit new patients. Overtime, she also utilized newspaper and internet ads recommended by CMWL. Of course, her endocrinology patient base and word-of-mouth were also very effective and cost-efficient ways to recruit weight loss patients. Approximately 25% of her weight loss patients are from her regular endocrinology practice.

Dr. Arden-Cordone discovered that integrating medical weight loss into her endocrinology practice offered great flexibility for expanding the overall practice. CMWL provided a turn-key operation including fully-developed Behavioral Counseling Modules on a wide-range of weight loss skills and topics; therefore, after the initial in-take consultation, each on-going weight loss visit can usually be conducted within 15 minutes. Occasionally she mixes-in weight loss patients throughout her established schedule, but because of the emergency visits often required by her endocrine patients, this sometimes becomes difficult. She now reserves one out of four of her 10-12 hour days a week just for weight loss patients, and she finds this type of schedule works best. In addition to her original staff of a Receptionist, a Biller, and a Medical Assistant, she has added only one more Part-time Assistant to help with weigh-ins and product purchases. She followed CMWL recommendations and flow charts for setting up the patient office flow and found they were immensely helpful in streamlining her office procedures. Dr. Arden-Cordone also relied on advice and training from CMWL for the coding and billing of her services. Overall, she found their educational seminars provided valuable guidance in both weight loss counseling and in growing her practice.

The Great Synergy between Endocrinology and Medical Weight Loss

There has been a great synergistic value in offering medical weight loss within an endocrinology practice, for example:

- Dr. Arden-Cordone's pre-existing patients who were overweight could now benefit from safe, effective weight loss from a doctor they had already come to trust
- Offering medical weight loss attracted new patients to the practice, for instance, those seeking to lose weight before knee or hip surgery.
- Spouses and other relatives of her endocrinology patients are often inspired to lose weight by seeing the success of their spouse or relative, or by reading the weight loss signage in the office.
- Some patients, for example, some of those with Type 2 Diabetes and PCOS, are able to decrease or even eliminate their medications after losing weight.
- With some endocrine disorders, being overweight raises the "chicken or egg" question, but losing weight is almost always a positive move for the patient.

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The Benefits of Integrating Weight Loss into an Endocrinology Practice

Dr. Arden-Cordone has said that integrating medical weight loss into her practice has yielded multiple benefits for her patients and for herself personally:

- She has seen an approximate 10% growth in patients, and approximately a 25% growth in revenues.
- She has diversified her revenue stream and increased her cash business.
- Her scheduled one day a week of weight loss patients has reduced the overall stress of her practice – the acuity of this patient group is significantly less than that of her endocrine patients.
- She has introduced a new patient base to her practice that creates great synergies with her endocrinology practice.
- Her increased knowledge and skill at weight loss counseling has benefited not only her weight loss patients, but her endocrine patients as well.
- In her local community, Dr. Arden-Cordone has become the referral source for physicians (Internal Medicine, Orthopedics, Cardiology) when they want advice for management of obesity in their patients. This has broadened her scope of practice.

Most importantly,

- The rewards for her patients' health after weight loss is life-changing
- Her personal satisfaction in helping patients become healthier has increased tremendously:

“I call my scheduled weight loss practice day my ‘happy day’. It is an easier day administratively – no prior authorizations, fewer follow-up phone calls, less data analysis. The office is busy, but the whole atmosphere is lighter. These patients are happier because they are losing weight, perhaps going off their meds, and getting healthier... and this makes me happy” .⁵

- Mary Arden-Cardone, MD

⁵ Arden-Cordone, Mary. (2017, July 28). Telephone interview.