



Successfully Integrating Medical Weight Loss into an OB/GYN Practice



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For more information:

info@cmwl.com

800-599-4190

www.cmwl.com

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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.

For OB/GYN providers, obesity can represent a significant factor in the health of their patients. Maternal obesity is linked with adverse outcomes for mothers and babies. A systematic review published in *Obesity Reviews* has shown that:

- Gestational diabetes, pre-eclampsia, gestational hypertension, depression, instrumental and cesarean birth, and surgical site infection to be more likely to occur in pregnant women with obesity compared with women with a healthy weight.
- Maternal obesity is also linked to greater risk of preterm birth, large-for-gestational-age babies, fetal defects, congenital anomalies and perinatal death.
- Breastfeeding initiation rates are lower and there is greater risk of early breastfeeding cessation in women with obesity compared with healthy weight women.
- These adverse outcomes may result in longer duration of hospital stay, with concomitant resource implications. Women with obesity need support to lose weight before they conceive, and to minimize their weight gain in pregnancy.¹

Despite these obesity trends 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.²

This paper focuses on the experiences of Dr. Kevin Jovanovic MD FACOG FACS, a board-certified Ob/GYN who graduated residency from Yale and went into practice in 2004 in Manhattan, NY. After four years of concentrating on OB/GYN, Dr. Jovanovic added-on a medical weight loss practice that turned into a thriving, well-integrated part of his overall practice. In addition to seeing significant returns within a short period of time, he found increased personal satisfaction in helping patients achieve better health through physician-directed, long-term weight loss.

¹ J. Marchi, M. Berg, A. Dencker, E. K. Olander, C. Begley. Risks associated with obesity in pregnancy, for the mother and baby: a systematic review of reviews. *Obesity Reviews*, 2015; DOI: 10.1111/obr.12288

² 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).care." *BMJ open* 2.6 (2012).

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Where Dr. Jovanovic Started Out

In 2004, Dr. Jovanovic's OB/GYN practice, located on Fifth Avenue in Manhattan was comprised primarily of hard-working middle class women— teachers, secretaries, administrators, retail staff, corporate employees – who depended on medical insurance. He estimates that in those early years, he was seeing 25-30 patients a day. After a few years, Dr. Jovanovic became interested in expanding both his interests and his practice. He added-on a Cosmetic Surgery and Aesthetics Medicine practice which offered synergies with his current patient base. Soon after, having experienced the challenges and frustrations of keeping his patients healthy, his interests turned toward helping to solve the obesity problem.

Where the Obesity Problem Led Him

Nearly every day in his practice, Dr. Jovanovic encountered obesity related issues...

- Overweight and obese pregnant patients with complications
- Post-partum patients asking how to lose weight
- Overweight and obese patients experiencing infertility
- Post-menopausal women gaining weight

The idea that seemed like a natural fit for Dr. Jovanovic's practice was medical weight loss. It was clear that many of his 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. Jovanovic already had established strong relationships with his patients, and he knew they would trust his treatment recommendations for weight management and obesity. But first he realized he needed to find a program that would provide him with the training and knowledge that would increase his confidence in delivering obesity care.

After extensive research and ruling out franchise programs that would require him to invest in stand-alone build-outs or that were too much of a cost burden, he found The Center for Medical Weight Loss (CMWL) in 2008. 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, he could easily add the medical weight loss practice onto his existing OB/GYN practice without relocating.

The program contained a large non-insurance component that would increase revenue without having to rely on reimbursement.

And, most importantly, the CMWL program offered the most robust medical weight loss training program and practice support services that would enable him to get up and running easily to start treating his patients.

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Growing a Weight Loss Practice

Initially, Dr. Jovanovic tried out newspaper and internet advertising to announce and grow his weight loss practice. Over time, however, he realized that his own patient base and word-of-mouth were the most effective and cost-efficient ways to recruit weight loss patients. He has found that two particular vehicles for reaching potential patients with a high conversion rate to medical weight loss services are donations of a free weight loss consultation to charity events, and offering Groupon discounts.

Dr. Jovanovic discovered that integrating medical weight loss into his OB/GYN and Cosmetic Surgery 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 be conducted in under 15 minutes. This made it easy to schedule weight loss patients throughout the day without eating up much time from the on-going OB/GYN and Cosmetics practices. Dr. Jovanovic found that his weight loss patients often called to schedule a quick visit to pick up meal replacements or get a weigh-in, and because of the short-length of the visit, his staff was easily able to accommodate them within the existing daily schedule.

The Great Synergy between OB/GYN and Medical Weight Loss

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

- It attracted males to the practice. Husbands and other relatives of Dr. Jovanovic's OB/GYN 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.
- Newly-married couples thinking of getting pregnant often seek his help in losing weight *before* the pregnancy.
- A new demographic of "over 70" men and women has expanded the practice further. These seniors, many of whom had been previous patients, are now seeking to fend off old age and illness by losing weight. Dr. Jovanovic has helped approximately 250 over-70-patients lose thousands of pounds since 2008.³
- Post-partum and post-menopausal patients can now benefit from safe, effective weight loss from a doctor they have already come to trust.
- Infertility patients who want to lose weight they gained from a previous IVF treatment often want to lose weight before trying again.

³ Jovanovic, Kevin. (2017, July 24). Telephone interview.

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The Benefits of Integrating Weight Loss into OB/GYN Practices

Dr. Jovanovic has said that “helping people lose weight and become healthier is the most rewarding thing you can do”.⁴ Integrating medical weight loss into his practice has yielded multiple benefits for his patients and for him personally:

- He is seeing 35-40 patients a day (vs. 25-30 before his weight loss practice)
- He estimates that weight loss patients now represent 15-20% of his practice
- Weight Loss visits bring back patients with a higher frequency and they then often make use of his OB/GYN and Aesthetics services
- The relatively short length of the weight loss visit offers great flexibility in scheduling and accommodating more patients
- He has diversified his revenue stream and increased his non-insurance business
- He has introduced a whole new patient base to his practice that has greatly benefited both his OB/GYN and Cosmetic Surgery practice.

Most importantly,

- The rewards for his patients’ health after weight loss is life-changing
- His personal satisfaction in helping patients become healthier has increased tremendously:

“When doctors or patients ask ‘How come I got into weight loss?’ I answer: ‘As a physician, I can write thousands of prescriptions a year and often it does not help the patient. Medications treat disease. Weight loss cures disease’.”⁵

- Kevin Jovanovic, MD FACOG FACS

⁴ Jovanovic, Kevin. (2017, July 24). Telephone interview.

⁵ Jovanovic, Kevin. (2017, July 24). Telephone interview.