Podcast Intro and Guest Introduction

Welcome to the Health Fix Podcast where health junkies get their weekly fix of tips, tools, and techniques to have limitless energy, sharp minds, fit physiques, or life.

Hey health junkies, on this episode of the Health Fix Podcast, I'm interviewing Adi Wishograd and she and I are going to be talking about nutrition and the benefits of a telehealth based nutrition company for your nutrition needs.

Now, here's the thing. Adi is a registered dietetic nutrition. She is also an LDNCO licensed dietetics nutritionist. she's the co-founder and chief operating officer of Everlong, the national telehealth nutrition company helping people transform their relationship with food.

Now, the biggest thing about these guys, they are transforming that relationship with a behavior first approach. This is something that a lot of programs overlook.

They'll give you macros and then they'll be like, here, follow this and let's see how it goes. If any of you out there have just tried macras and not looked at your behavior and your connection to food, you're probably thinking right now, yes, I didn't have great success with just the macro.

Because let's face it, as women in particular, we've got some interesting relationships with food. I'm calling myself out on this one, I've struggled for years with overeating, with stress eating, and really the macros didn't help me in that case because I would tweak the macro's to be able to fit in my little stress situations where I'd stress eat and then I'll be like, well I just won't eat dinner because just ate a whole bunch of macadamia nuts and chocolate chips.

Hacking your nutrition is so much about looking at the behavioral aspect of things. Now, Adi has over a decade of experience and she's really looking how people actually live, not what they eat.

And this is so huge because her dieticians support patients in building a personalized habit free from guilt restriction or even diet rules. Because let's face it, these things do not reflect real life.

The coolest part about our program is if you have insurance, their sessions are covered at a hundred percent for 95% of patients, which is fascinating.

And she and I go into like how many visits do people on average get and it's mind blowing here. So everyone is a accessible judgment free nutrition company that supports people to heal their relationship with food.

And really, not only do they work with eating disorders, because we think about behavior and we about that connected to eating disorder. But actually, they worked on sports nutrition.

They also work. With eating, like around having celiacs. and eating around autoimmune conditions and what to do and how to help with your behavioral situation.

In this case, because I think for a lot of people when we've been diagnosed with chronic health conditions, we don't know necessarily one what's to eat or if, or, if our relationship with food isn't impacting this as well.

And so, so many fascinating things we talk about here in the podcast about how her Everlung program works. And how they are impacting folks lives through working through the behavior approach first.

Behavior-First Nutrition and Everlong's Approach

So cool. Well, you know, when I saw that you are the co-founder of a telehealth, behavioral nutrition company, I

was like, yes, please, we need this. We need more than ever because I'm sure you're seeing a lot of people are turning to the GLP once and with that, comes no behavioral change unless you're specifically working with a group that does that.

And I think we're gonna be heading into a realm where a lot of people are going to realize that if they didn't get their changes happening with their behavior around food, weight's gonna come right back on.

I'm sure you probably thought about that Yeah, we do see a large population of patients that are on JLP ones. And that's a big angle we take. We work with you in that realm, not against you.

I think that it's the common misconception of whether you're coming out to do this really to make sure that you have the nutrients you need, you feel good, and you are working for those long-term changes.

So definitely a big piece we're seeing even more and more now with the patients on GLP-1. It's such a thing. And so important to have this. Now, of course, what brought me to you as well as I saw, you guys take hundreds, like lots of different insurances.

What brought you to starting Everlong? And of, course we are going to ask what's in the name and all that. But what about you just starting an offering to insurance when a lot of folks are just going into the realm of offering private nutrition and different programs of that nature.

Yeah, definitely. So I, you know, obviously I'm a registered dietitian, so I ever long started when I was doing, I had my solo practice. I've been in the field for around 10 years and I started seeing, working with patients one-on-one right away, but it wasn't insurance for a while.

And I was kind of in and out of seeing patients. And then ever long as it is today, we began, I just kind started expanding, you know, seeing patience.

There's a need for this in different states. So I first started taking insurance and then I started bringing on my first few providers and it really just grew from there.

The piece where we have the behavioral The behavioral piece and the clinical piece that we tie, that really stemmed from just, I've always been interested in psychology and nutrition.

I have always counseled that way, where we focus on the behavioral pieces, the habits, but not everybody does, and dieticians are not trained in that.

And so when I started seeing there was this huge gap, We actually, the whole company went through a rebrand where we brought on providers that were trained in these specific modalities and had backgrounds working in behavioral health and mental health, and eating disorders.

And we shifted this way just because there is such a need and a gap in the dietetics profession and industry. That's really where, ever long as it is today, was born out of that need of, okay, there's tons of clinical dietitians, but nobody's addressing this root cause of behavior and habits.

And that's really what drives it. Absolutely, absolutely. And it definitely fills the space for doctors that, you know, it's not our specialty and we need help outside of the realm of what we can do.

When I saw the comprehensive behavioral work you guys teach, I'm like, oh, this is so huge. What's kind of been found in your group to help in terms of setting a plan for behavioral intervention?

What's been, you know, just to give folks an idea of how often they may need to meet up with someone, what's kind of a traditional way that you've seen the best success?

Yeah, so we actually work with patients more on like a therapeutic approach. And so a lot of the time it sounds like

people describe it as therapy. Like if you read some of what people say on reviews, it's like, oh, this is literally changed my life.

This is like therapy, And so we do, we meet with patients on a weekly basis and that was driven from research about how many touch points or sessions does it take to truly start seeing change that will lead to long term change, right?

Not just like a quick fix or, you know, one session and you don't meet them three months later, which is very traditional clinical dietetics, see someone in an outpatient setting and then, oh, they're booked, you know, two, three, four months out and you only meet for 20 minutes.

So our whole, the whole company is designed around that. And then also there's a lot of research that shows that when you're trying to make behavioral changes, especially with nutrition, I mean, it's such a large component of our lives where we eat every day.

Those touch points help people be more successful even between sessions, right? the accountability knowing you have that appointment coming up and then also you know the patients can monitor, track you, know their hunger fullness, how they're feeling between meals and so and the portal we use and it is really more of like a therapeutic journey knowing that person to hold you accountable and be your support system rather than You know, this dietician barely knows me.

We really get to know our patients truly on like a personal level. Nice. That's important. And that's kind of why I asked because that has, you know it's also been the state of healthcare where it is where folks will be waiting, six, eight weeks.

It's like, oh my goodness, between visits and in that time, no access to questions. No access being able to ask, what do I do? It sounds like you've got a portal system.

Like you said, we can track things. Can folks also troubleshoot a little bit with their dietition as well? Yeah, so are you asking, like, can they touch base with their dietician between sessions?

Yeah. Yeah so our diaticians, they definitely can, you know, shoot them an email, a chat, and if they have a question a lot of times the people are like hey I'm at the grocery store like I found this what do you think or like here's my symptoms I've found and like what you do think of this.

And the dietician can see what they're logging, if it's like a GI, someone with GI struggles that's posting how they're feeling in between meals, whatever it is, they can go over that together so it's really neat.

You can say, this is what happened the last couple days and let me pull it up and talk about it on the session. Because they have a full 55 minutes together on each session, it has plenty of time to dive in to the nutrition piece and then let's talk why you felt this way or why these things are happening from the behavioural piece.

That's really cool, that's cool. There's weight issues that come, you know, with hormone shifts and whatnot.

Weekly Telehealth Support and Patient Accountability

And so a lot of women are really, really struggling with the psychology aspect, what to do and how to let go and also conflicting advice on social media as to what do.

Give us a little background in terms of how you guys are working with women in this particular space and Some of the you know, if you have a client story or whatever how give us a little sense of like if someone Between 35 and 55 stepped in and and maybe they're experiencing hormonal shifts and they are trying to figure out Why is my weight going up?

What can I do about it? How would it look to just step in in visit with you guys? Yeah, so that is actually like an age

range, kind of the most common age-range.

We're usually working with people I would say like 25-30 to 45-50. And we work with a lot of women and what would happen is, you know, usually women in that situation are coming in, like you mentioned, they're struggling, They're not feeling great, struggling with weight gain, and they don't really know what's going on.

and then there's that emotional piece of depending if they've had a lifelong struggle with dieting, right, chronic dietting, or maybe they have a condition they're not getting the proper support from their healthcare team, that's common.

So we come in and, I don't want to say we're, we are not investigators that are working with you, but we have come and from the beginning of your intake, were diving into everything.

What's your, you know, history with nutrition and dieting? What is your history of any trauma? You know tell us about your relationship with food from when you were little.

Tell us what your relation with your food now. Do you have a partner? Like what does your life look like on all fronts? We really take this holistic approach.

I think the word holistic tends to be thrown around. Like, what is that mean in our sense? It's taking into account that every decision you make around your For a reason right, you know, it's not a lack of discipline.

It's you may be busy You may working eight hours a week you have a family whatever is going on. So we personalized the approach to Every specific person we don't have like a one-size-fits-all plan.

You know not every providers is Working with the same background and perspective and so when you come in we have that intake dive in and then we started saying Where can we start?

What's the lowest hanging fruit? what do you feel is doable right now? Just because you come work with us doesn't mean you have the capacity to change everything in your life, right?

So it's what are those baby steps that we can take to help you move forward and feel better or boost a little bit of confidence or really try to understand Why am I doing these things I'm doing?

Why are my habits this way? And then that's where each week you're kind of, so saying it's investigation, like you kind diving into what happened this week?

How did things go? What did you struggle with? After a month working together, how are you feeling after two months? Then from there we kind keep tweaking our intervention and treatment plan based on how you are feeling.

Makes sense. You know, when I look at behavioral change, this is obviously at the root of all weight, if we're talking weight issues or if were talking even And I'm a naturopath, so I am going to put my opinion in here.

Is that why we have certain conditions happening, right? But also the side of it is the nervous system and nervous-system regulation. And sometimes we'll use it for that.

Sometimes, you know, comfort food versus other things. What do you feel like if we're looking at behavioral change and say someone's on the fence of, do I really need help?

What would you say that could be some clues that behavior is intervening here and and that it might be something that needs a little bit of support if someone's just you know thinking I don't know do I need this or not.

The biggest thing I would say is history and like cycles of what's going on so if you are someone that you know, says you're gonna make changes honestly in any aspect of your life because when someone says, oh I want to get a promotion, I wanna change my job, all those things come down to how do you feel about yourself, how you show

up, do have energy to do the things you wanna do.

People come to us and their outcome might be six months later, oh my gosh, these things in my life changed that I didn't even think were related, right?

And so it's the cycles of where do you want to be if you think you don't need support? Are you where you wanna be in different aspects of your life? Are you repeating cycles, like saying, I'm going to do the annual New Year's, right?

Like I want to change this year or saying I am not going do this diet, but then we get pulled because we are so used to being in this cycle to doing it.

And not just a diet. Just anything, committing to exercising more days a week than is feasible for you. I think if you are somebody that kind of tells yourself the same stories and you recognize the cycles.

Then, and it's really hard to, you know, pull the trigger and make change because it is hard put the effort in to work on ourselves. But we try to make it easier by meeting you where you're at and saying you don't have to fix everything at once.

Just start, come and take that hour for yourself a week and if you get nothing else from it, at least it an hour where your focusing on yourself. You know and then we can focus on the behavior change next once you feel more comfortable and ready to do so.

That makes sense. One of the things you brought up was time. And I think time is a huge objection that people have to making change. I don't have time to do this.

Another big one is I do not have enough time for meal prep. How would you work with that in specifics just to kind of help folks see a little bit of maybe it's not as much effort and time as you're thinking.

yeah i think personally i have always been like i've always worked with my patients like this that what is the easiest kind of like lowest hanging fruit that we can do that takes the least amount of time because i don't like spend a lot of cooking i only spend all the time on these things right i'm like okay what do i actually enjoy that i am going to do um for exercise and food so the biggest thing is Kind of what I was saying before of not the expectations.

It's huge with anything you do with nutrition and health. What's the expectation? Are you setting yourself up to be successful or not by telling yourself you're going to make all these changes?

Women, Hormones, and Personalized Nutrition Plans

So I think if somebody's really struggling with time or they can't even imagine adding something else to their plate, which I would think is most people, just think one small change.

can make a difference, you know, focus on one meal, one snack, and one walk a week, whatever that goal is. One night where you go to bed a little earlier, or you shut your phone off.

Those things can compound and so I think that's what stops most people from really focusing on their health is that the all or nothing mindset and setting proper expectations.

especially in different stages of our lives like sometimes you're in that point in your life where you have the time and effort and energy to dedicate and other times you don't and so we see that when we work with patients is like, sometimes there's seasons where people are really gung-ho and have time, and then they're not and that's fine and we just kind of flow with them and change the goals and the treatment plan based on where they are at.

That makes sense. That makes sense. And I think that's such an important topic because, you know, I'll have women come to me and, and while I'm not doing nutrition counseling or any of that, the GLP ones.

are things that I do prescribe if indicated. Like, I need to just lose 10 pounds and I needed to have it off in like a month. And you're like, okay, all right.

You know, and then you like what are you doing? And there's a lot of, you know what you are doing to make some interventions and it becomes this thing where, is it enough that can bite off all the different things I wanna do and do it.

So it sounds like you guys help quite a bit with like prioritizing and organizing how to set up your intervention. Yeah, definitely. And that's where like you mentioned the expectation piece is huge because even with a GLP-1, right, it's a tool.

It's there to support you, but setting the expectations of what else can you do around it? And then also with the GELP 2, there's, a lot of, It is really both.

it is like nutrition and making sure you're getting adequate nutrition, you are hydrated, and you feel good. and then there is the behavior piece and so, I think a perfect conversation there.

We work with alot of doctors, providers that have medical weight management programs and we do come in and do the behavior piece, it's setting the expectation or having that conversation right up front of, okay, what is realistic and what does healthy and, you know, advised and back to, long-term change.

It always is coming back. So like, why do something that's not gonna last? That's a lot of time and effort and that cycle continues. And when the cycle continuous, It's harder to break the longer it goes on.

This is kind of a theme, right? Like everything. ties with not having the all-or-nothing mindset and really truly in learning and leaning into just making small changes that add up in time, even on a GLP-1, right?

If you have it as a tool, the goal is to be able to keep that weight off and like really learn those habits for when you're weaning off of it. So huge.

And I think that's probably where, you know, we need a lot of support right now in that realm, because I'm seeing people get the results, seeing them lose the weight.

But I've also seen them tell me like, yeah, I m not sure what I am going to eat when I get done because i'm not hungry, i am not eating, but then when the food noise comes back, what do we do?

It's overwhelming. Yeah. Right, right. And so food noise being one of the big topics, you know, and behavioral health around food topics. So this, or food, not food topic, food noises.

What kind of things do you tend to work with your patients on when it comes to the voices in the head being like, oh, it's just one bite. Well, look at those cookies over at Crumble.

It's right down the street. I'm going to go over there. You know. How do we work on those kind things? What kinds of thing can we give folks an example of what might be some behavioral interventions there?

Yeah, absolutely. So the biggest thing is creating that awareness of when is that happening? You know, how frequently is it happening and how is impacting you?

How are you feeling around those decisions? And that usually starts with keeping some sort of a food log or we call it like a Food and Mood Journal because you can't really make changes without being aware.

People can sometimes be aware that it's happening or they just feel like it all they think about is food and have that food noise, but how else isn't impacting you and what are those you know internal things you're saying to yourself around what's happening.

So we kind of start with that and it does touch a little bit into some of those counseling skills right of like cognitive behavioral therapy and really learning how are your thoughts around that are impacting.

You so from there when you create that awareness a lot of things we might do is maybe use like a hunger fullness scale and teach What does that mean and how do I listen to my hunger and fullness cues?

And then also figuring out what is behind some of the food noise, like when you're thinking about food, when your turning to food. What are those emotions going through your head?

What's going on and what's the backstory behind it? Diving into is there trauma, history, relationship with food? So when we collect all that and kind of start with those interventions of keeping a food journal and then creating that awareness and saying, Okay, now we know that there's a link between you stopping on your way home and this meeting on Tuesdays.

Maybe it's linked to a really high level of stress in that meeting, or maybe you're not in a happy relationship and so you are struggling at home with that.

And there is always an underlying piece. Humans, we're just not disciplined and we should be doing better. There's always a cycle, like habits are built out of cycles when you get up and you brush your teeth, like that's a habit.

When you tie your shoes, it's habit and so these are things that are deeply ingrained. What we're doing is we are kind of taking these habits and like dissecting them and saying where do they come from and then slowly beginning to change those habits, and rebuild those thoughts and those feelings around food and turning to other things, right?

So we might recommend mindfulness techniques, hobbies, different things you can get or additional support. You know, if we think you want to work with somebody from a therapy standpoint and us, right?

It complements each other nicely. And so I think that just kind of building that care team and that support system for you. That's where it takes time.

You can get a lot of progress in 30 days in terms of creating this awareness, but you're not going to change years of habits in such a short period of time, so really being like, dedicated to it, but knowing you can make small changes at a time.

And I think for many people, that's where we've gotten into that loop of like, well, I'll just take the diet pills, right? Or I will just go take, you know, GOP1s or something of that nature.

It sounds like I'm hating on them, but it's really not that, it is just the thinking. I am trying to put it out there, not thinking that they are going to solve all of the issues.

Now, when it comes up, one of interesting things I noticed is that you also have sports nutrition in there.

Behavior Change, Food Noise, and Emotional Eating

And, for a lot of folks, We, if we weren't an athlete, and even then, high school athletics for me were like for swim team, it was like binge on pasta the Friday night before the Saturday, you know, meat.

And that was the extent of like nutrition for high-school athletes. So I think for a lot of folks, we also are kind of confused as to like, all right, now, I'm actually wanting to be more fit.

Maybe I want to train for marathons or something of that nature. How does that take into You know, if someone is looking for something like that, tell us a little bit about how that's different from working on, say, someone wanting to work on weight loss or eating disorder type of situation.

Yeah, absolutely. I think what's important that you just highlighted is that nutrition counseling and nutrition, as I mentioned, it's we eat every day.

It's such a big part of our lives. It doesn't, you don't need to have some huge thing to work on or a chronic condition. Absolutely, we all need some support.

Like I've worked with dietitians on and off myself just because I want support, I like to learn from them, or you know I kind of like work focusing on specific pieces of my nutrition at different points in my life.

And so somebody that comes in with sports nutrition, like wanting to know about sports or struggling, for a marathon training or whatever it is or just healthy general nutrition we have that as an option.

So you don't need to feel like you know I'm quote-unquote normal around food like do I need come and get support? You know as a dietitian myself like I just had to work with one I think there's absolutely we can all get support it doesn't need to be on this you know oh i have something i'm diagnosed with so we do actually have a lot of people that come in and say i am training for something or i just reached a goal and now i want to work on the sports nutrition piece and that's completely fine i mean i think that there's still a lotta parallels like you still have habits you have to build around it but maybe it's a little bit less like intense obsessions you now if i can say that but there still of course things that we could help with and It's great because then you're focusing on your nutrients.

You're going to feel better around your workouts or whatever you are coming to see us for. And I love that you highlighted that because that's kind of what I was thinking.

Sports nutrition is kind fitness, longevity nutrition, whatever. We don't necessarily need to be a dietitian because there's a problem. good to just kinda go in and be like, all right, am I creating balanced meals for my body?

You know, is this working? Now, of course, a lot of people right now, there's debates on fasting. There's debate on, you know one meal a day situation fasting, There is debates macros.

Do you do them? Do not? How do you guys approach that? Like what's the take there? Because I think a lotta people are gonna ask me, well is it just the macro space program?

Can I plug it in like boom and go along? Yeah, so the big piece of when someone comes in, we're meeting them where they are at. So from like a behavior change approach, We work on interventions and treatment plans that are not so restricted or numbers based.

We really focus on kind of getting somebody away from that, especially if it's triggering, if they have a past of disordered eating. Numbers and focusing on, you know, food blogging and stuff is definitely something that we would absolutely, stay away.

However, we are meeting you where you're at. So if you come in and you say, I've been doing this and this is working for me, and I find that I like this piece of it.

Okay, amazing. Now we have that information. Everything is just data, right? Saying that you struggle with being on a macro plan or a diet, now we're taking the data and we say okay, what part of that are you struggling with?

What part do you feel like is actually working with you? If you're somebody that works well with structure, let's build structure that maybe isn't as rigid as feeling like you have to track everything.

But the nice thing is when you so much time to meet with someone or really get to know them and you do such a thorough and deep intake, you can pull those pieces out and say, okay, we're not coming in and telling you to stop everything you are doing.

We're telling what you doing is wrong. Everyone has their truth with why something works for them or why doesn't work for we're gonna unpack that and then provide the recommendations based on like what works for you.

We're all different. Some of us do well with structure and have routine and some don't. And so how can we figure out what's gonna work for YOU long term?

Because what WORKS FOR YOU isn't gonna WORK FOR ME and the next person. So that's where I think it is important to highlight that, that you brought that up.

Because it's, you know, we are all DIFFERENT. It would be silly if we said here, everybody does this. Which historically with diets is kind of what you know, you're buying something that's for everyone, right?

And it's not a one size fits all. That's what I was wondering, because if you look at different individual providers out there who are doing their nutrition programs, they have their program, and their programs has the same like, this is what we found to work, we're going to do it this way.

And I really like the flexibility to meet someone where they're at and be able to adjust accordingly. Now, when it comes to condition-specific eating, and one of the things that I know a lot of people will struggle with is if they are first diagnosed with celiac.

And they're going, you know, my whole world is wheat. What do I do? You know? Let's talk about condition specific types of situations. You even described before we hit record how you guys were just learning about a new condition that that you didn't have training on.

So you're guys are getting trained up on that. Well, what kind of things does someone want to take into consideration when they've just been diagnosed or they have a certain autoimmune condition or something of that nature?

and they're trying to find a solution for themselves. Yeah, I think the biggest thing that in a situation like that is usually they are not… I mean, in, a celiac situation, maybe somebody's brought up nutrition and dietetics and saying, you know, go see a dietician, and go to see somebody that can help with this.

But I, think it's finding the right support because like you said, it really can change, You know your whole life and you're, stuck. You don't know what to do, especially if somebody is newly diagnosed even with diabetes or something.

Most There are a lot of great doctors that will recommend nutrition, but we have a lotta people that come to us and say, I was just diagnosed with XYZ, and I don't know where to turn.

And, you know, i was speaking to a woman recently who has kidney disease. She said she has never been recommended. a dietitian, like an outpatient dietician to work with ever.

And I was shocked. I couldn't even believe that she said that and she couldn' believe this exists. So I think that finding support and doing, it's unfortunate because you kind of have to be your own support system, kind like in the word, rally for yourself.

You have be the one that kind seeks it out because your providers won't always tell you. Maybe they don't have enough nutrition training or they dont know or don' know where to turn to give you those resources.

But I do think finding support, a group, dietician, you know, whether it's a Group Online or a groups in your area. And I think what people don't know is like the insurance piece, right?

It's, oh my gosh, I just got diagnosed with this, how would I ever afford a dietician? But with the Insurance piece that's all covered, so we don' t even dive into that.

Sports Nutrition and Flexible Counseling Styles

But just knowing that that is a resource for you is really important and then you don t have to do it alone. because

then you and your dietitian are figuring out together how you're going to navigate it.

You're not going into your kitchen and figuring it out alone. Well, and that's what so many people do, especially with kidney disease. There's so much confusion there.

Diabetes too. And unfortunately, social media doesn't help because there's do this and do that. Then next thing you know, you do nothing because I don't know which one's right for you.

So, you know, it is. It's a huge confusion space. And this is why what you're doing is so valuable. Let's talk a little bit about insurance because, a lot of folks will be like, maybe I can use my insurance.

By the way, guys, go to their website. You'll know when you go into the booking process, even before you can book, if insurance is going to cover. Tell us a little bit about like, what does insurance usually like on average?

Because I know plans are different, but how many visits on an average will they cover for how long amount of time for folks? Yeah, so with every plan, you know, every plane is different.

And it's kind of that might be like an obvious humid. But what's even crazy with insurance is that within, one plan there's sometimes different tiers that cover different things.

However, with our services, it falls under preventative benefits and those are covered and bypass the deductible and copay in almost all instances. It's over 95% of our patients that have insurance that they want to use for our service are 100% covered.

So there is actually zero dollars of patient responsibility. And most plans because of this, it's based on medical necessity, they won't cap it. Some plans may cap, and that's something we will know, but that is usually enough sessions to be seen for half a year or a years.

Here and there, like you said, there's a couple of plans that maybe they'll cap 10 sessions or something like that. but it's very rare and that's where when you go on our site you can see you know right away oh you'll have coverage for this but because of those preventive benefits nutrition counseling coverage has just greatly expanded especially I mean even before COVID but especially since after COVID and I think that is it is a benefit that most people don't know they have.

I thnk most jar people dont even know that their employees have it. Most gym owners dont know this is even a thing. So it's still being shared and people still don't know about it.

This is kind of like a baby thing that's growing that people are like, oh, wow, this is actually a thing covered by my plan that I'm already paying for.

So huge. And what about folks that have chosen to get minimal insurance or catastrophic insurance? What can they do? I am guessing you guys also have cash prices and different things there, packages.

yeah so we do have cash prices it all works the same online like you can go and click just like, you know, self-pay and then we also can accept like health savings and flux savings accounts so sometimes people you will have that from a past job or a current job and they don't choose to use insurance so that kind of works.

The same way that doesn't change the booking process at all. You can still get scheduled in just a couple minutes and select that but we And we're actually always working on expanding coverage.

Would you take Medicare? We're working expanding into additional state-specific plans to just increase the access. So it's kind of something that our team's always Where is there a need or a gap that we can fill?

And then if we're able to get those contracts, we will. Awesome. That's really neat. You guys are doing that. I think for a lot of people, one of the big coverage questions you already answered is how much time, what might be my

out of pocket, and things of that nature.

Even the cash pay is is awesome that you allow that, because some places will not allow cash pay if they do insurance. That's weird. Now with all of these, of course, folks are going to be thinking, do I need a referral?

Do I meet my doc to send up a referal? Is that a thing? No, it's not a think. So you actually don't need our referral. There's some plans, a couple. And for the most part, no.

You can go on book, donate or referrals. I want you to talk to anyone. We only will ask for a referrals when Medicare needs a role. But you know, if that's really If most people are saying or not, you know, having Medicare benefits, it's not really relevant.

The times that you'll need a referral are some HMO plans and will need to referral. And then there's a couple like state specific plans that need referrals, but especially You know, PPO plans don't need referrals.

Some HMO plans, you know you just have your doctor put something in or we ask for it. But the barrier to trying is extremely low, right? You could just go on book, we're confirming your benefits in real time online and then you don' t need a referral.

And if you do, will reach out before your session. It's so few and far between. that I would probably guess like under 1% of people that we work with, we actually need to touch base with them to get a referral.

It's very low. Nice. And do you guys communicate with people's providers?

Condition-Specific Nutrition and Insurance Coverage

Like say someone's referred over, you know, because I saw the refer a patient button, someone referred because maybe they have a lot of like food sensitivities.

And you're working on their gut, but they're not eating, they just need some support in eating clean and things of that nature. Would that be a referral that someone could send in to and collaborate a little bit with?

Yeah, absolutely. So we do, we share notes and updates and treatment plans with providers. And then we also, our dietitians do work a lot with patients therapists, so they'll collaborate, to have a check and call or they'll email back and forth if there's any questions and so we absolutely like we're big on collaboration of care and it also is something that for I mean I think most providers care about this but dieticians specifically it's like if we are trying to figure out what's going on it is really really helpful for us to do labs to if you did genetic testing whatever you do if a GI doctor you're working with.

If it's eating, whether it is eating disorders or not, connecting with a therapist, but specifically if somebody is struggling with disordered eating or eating disorder and they are seeing a therapists, all of those things are just going to help us craft a better treatment plan for you and be on the same page.

So that's kind of going back to the time thing. If you're seeing two providers, but you're working on similar things with those providers, they're actually, now you are getting double support.

You're not, this person's, I gotta do this homework for this provider and this one for another, right? Like there's they work together where like this week between my GI doctor, my therapist and my dietician, and I'm working this.

And that's where I can work really, really nicely together. Oh, that makes perfect sense. That makes sense and that's wonderful to hear, you know, as a provider who struggles to find nutritionists that you can get in with, and for my folks too, especially ones that take insurance.

And I think this is something that a lot of providers struggle with. Those of you who are kind of going like, man, maybe I could benefit from some nutrition visits.

This is why sometimes we don't have referrals for you and this situation we're into and because it's all tele so folks can do this from the comfort of their home they can pop in you know on breaks or whatever they need to do so all that being said we've kind of went into some of the minutiae and I know that you for some folks are like okay that's great give us the details I am very curious as to your business name ever long Where did it come from?

How did you guys develop it? Since you are a co founder, I'm super curious of about that and giving us a little details on on your background of what brought you to become a nutritionist in the first place.

Yeah, so ever long, it's funny, It was actually by the name before it turned to just, we dropped the, it was Everlong nutrition, so we drop the nutrition and then it's just Everlon.

I think really even what's kind of interesting about the name is even before we transitioned to this, you know, behavioral nutrition piece or focus as a company, Everlong is kind of like, you know, the word or just when you think about it, it's something that keeps going, right?

It's almost like evergreen, like it is going to remain and it will be sustainable. But I think that that's where everlong nutrition stemmed from and then we dropped the nutrition and I just think having the simplicity of the one word and just kind of you know it almost it's like more powerful right without the nutrition.

And then for me, so I actually became a dietitian struggle like after I struggled with my own nutrition and weight goals when I was little so, I think I saw like my first dietition I want to say I, was 12 or 14 and I remember I would go in you, know my mom would bring me in and we talked about I don't know, probably like healthy snacks as a kid or like what do you eat after school or how do move your body?

And I remember specifically I just got, I went through a big weight loss journey and I remembered learning just how to eat. I grew up in a household that eats pretty healthy.

My mom cooked. We had pretty good variety of foods in the house, but I was an overeater and an emotional eater and so I struggled with that. forever I mean it's still something it doesn't go away you just kind of learn the skills and the tools to you know change those behaviors and habits and be aware of it and so when I went to college and I studied nutrition I was always looking for like where's the psychology we take a psychology class or it was like Psych 101 it is not really like the deep psychology I'm always I want to learn about cravings and and why we're eating this way and i remember I wanted to double major psychology and like now years later I see why like I, see this intersection so it's kind of always like subconsciously I was interested in it and I'm like oh now I get it like duh of course they're related but I think that's where it stemmed from and so naturally when I started counseling I would teach myself these different skills and I was just counseling patients that way.

It wasn't like, let's just talk about food. What's going on? What are your feelings? You know, in another life, I would definitely be, do therapy, right?

It's like because of that blend, and I'm so interested in it. And I actually have a lot of psychologists in my family, like immediate and extended family.

So I think there's this innate interest of blending the two between my struggles with nutrition And my psychology, that's, you know, where it stems. And I still get like so excited.

We'll, we'll do like trainings. I'm like, Oh, I want to watch this training. Like the team's doing, it's like on psych or like why we eat the way we do.

and I just think it, It's really fascinating. More people are, like you said, kind of moving in that direction of understanding the behavioral piece, but we have a long way to go.

Absolutely, we absolutely do. Thanks for sharing your story. It's incredibly relatable when we realize that it's more than just the foods that we're putting in our body.

So many women will come and say, Doc, I'm eating all the right things, but my weight won't come off. And I've learned this with my own journey of overeating and stress eating, that you can eat the good things.

But if you're part squirrel, as I joke that I am, Macadamia nuts kind of build up over time. And I love them buggers, but boy, you eat a whole bag of those and you've done a lot of good dense nutrition stacking right there.

Everlong's Origin, Founder Story, and How to Connect

So it's a matter of looking at it in a different perspective and looking those behaviors. That's really what I've found over the time that, unfortunately, a lotta folks will go to a regular dietician that's maybe in the hospital setting or a clinical setting, and then you get the like, here's your macros.

have a great day. It's never worked on my end. That's why things like Newm and the other things have not worked because of needing to get to the bottom of things.

And of course, that's what I wanted to bring you on because the behavioral aspect of it, because that is the root of. Absolutely. So, oh my gosh, such good stuff.

Let's tell folks how to find you because websites a little different than the business name. GetEverlongCorrect.com. Yes, geteverlong.com. Everlong, like the Foo Fighters name song, is a good way to remember it.

That tends to come up. So just get everlong dot com. And when you go to the site, you can get started. You can confirm your coverage and everything is verified before you book.

The whole process takes like two minutes, three minutes. It's really quick and easy. And, you know, it's you can read a little bit about like the conditions we see on there as well.

Excellent. And are you guys on social media at all, like Instagram or Facebook or any of those things so folks can kind of see what you're up to behind the scenes?

Yeah, so it actually get ever long with an underscore on TikTok. on TikTok and on Instagram. Excellent. So you guys can check that out there too. And of course I'll have all of this in my podcast notes at drjkraussnd.com and gosh, such good stuff.

I'm really excited to be able to refer folks to you because this is great to go along. Of course, I am more virtual now, so having more of a telehealth based nutrition programs that we can send to, but also just because of all the insurance, it's helpful because people do want to use their insurance and this I think you thank you so much.

I really appreciate it. Thank you for coming on. Yeah. Thanks so for having me. This is great. Hey, health junkies. Before you go, I want to tell you a little bit about something.

If you are watching this on YouTube, you probably saw me drinking a pink drink while recording the podcast. Well, that is from my sponsor, Foria Wellness.

They are the makers of Mellow. These are magnesium super blends that help with feeling more chill. And hey, let's face it, this day and age, sometimes with all the things going around, we need a little more chill.

This is 300 milligrams of magnesium in a pretty powder that tastes mildly sweet, nothing overpowering. It also has L-theanine and GABA. These are things that help calm our nervous system.

And if I could tell you anything about the body, if we have a dysregulated nervous that's on fight or flight mode all of the time, we're not as productive as we could possibly be, and we are not centered, focused and grounded as could be.

So this can just help you out to get there. Check out Foreo Wellness's Magnesium Super Blends. And see what

you think. There's a couple of them. This pink one here is the pomegranate, there's the purple one that's lavender berry, and then there is one called Naked that is just plain and you can throw it into smoothies.

But hey, let's face it, plain magnesium powder isn't as tasty and I'm always looking for something that pretty and tastes good too. So if you're looking for a little bit of support when it comes to helping your nervous system get in a parasympathetic, chill state, Mellow from Fourier Wellness is something to look into.

All right, have a great day, whatever you doing. Hey fellow health junkie, thanks for listening to the health fix podcast. If you enjoyed tuning in, please help support me to get the word out about the podcast, subscribe, rate and review and just get that word.

Thanks again for