Parsley Healthu2019s mission and the power of outcomes data

If we could track outcomes and show that this medicine worked, right, that it reduced costs, it resolved chronic disease, improved overall health status, engaged patients, we would have a shot at embedding it in the wider healthcare system.

My vision in starting Parsley Health was really about How do we scale functional medicine? How did we get this kind of care into the wider healthcare system?

Because if we all had the choice, we'd all want a functional doctor as our primary doctor, but that hasn't been accessible to everyone, and so the data has been a big piece of Hello and welcome back to the Evolution of Medicine podcast.

I'm your host, James Maskell, and this week we have an exclusive interview with someone who is breaking the biggest news in functional medicine of the year.

Dr. Robin Berzin is the CEO and founder of Parsley Health. She's been growing this business for over a decade. And today, you're going to hear a massive announcement that has implications for you as a practitioner.

And no matter where you are practicing, no matters what your business model, I think you will be blown away. Now, what are the implications? Well, let's discuss together.

I'm feeling called after recording this episode to set up some weekly time where we can talk together to see what the implication is for my practice. What should I be doing differently with this news?

It is that big. So I don't want to give it too much away, so enjoy. Hello and welcome back to the Evolution of Medicine podcast. We have got an exceptional podcast for you today because we have an exception guest, Dr Robin Berzin, at one point held the record for coming on the Functional Forum the most number of times.

But you may know her as the CEO and founder of Parsley Health. But before she was that, she also was the second guest on the Functional Forum back in 2014 as a leading expert in the cross-section of technology and functional medicine, which has been a huge topic throughout the years and something we're consistently on.

Parsely Health has grown to be a national brand. with centers in different cities and also many physicians working for it. I've referenced it so many times over the years as what it takes to build a brand where practitioners follow the same standards of care, and that's taken so much effort and work.

A couple of years ago, we did a podcast called The One Woman Evolution of Medicine because you were a hero of my first book. We are here today because we have very exciting news in the field of where Parsley Health is going that has implications for everyone in that field.

Robin, I'm so grateful that you're on here to share and grateful to have you back on the podcast. Well, that was quite the introduction, James. Thank you so much.

I'm thrilled to be here. leaderboard. I remember also going to HuffPost Live and doing a session there. And you know how crazy that then I think you were just Robin Burz and MD, but now here you are.

Jeff Glad was the other speaker. Now he's the medical officer of Fullscripts, like a billion dollar company. So it's crazy who we are, it is not crazy in a certain way, right?

With the beginning, understanding the technology and building towards the future. So catch us up today with

Parsley. Last time we spoke, I know that you had shared with me, from doing the membership model for a long time, you'd gathered an incredible amount of data about the outcomes that your generated.

We spoke then, as you said on the very first time that we were there, that tracking outcomes was critical to moving the movement forward. and that the benefit of tracking those outcomes would sort of have an exponential effect.

And I think part of what we're going to talk about today is built on that, right? Absolutely. I mean, I remember having a data scientist on staff and we didn't really have any data, but I knew that if we could track outcomes and show that this medicine worked, right, that it reduced costs, it resolved chronic disease, improved overall health status, engaged patients, we would have a shot at embedding it in the wider healthcare system.

And my vision in starting Parsley Health was really We talked about this a lot at the time, not starting a medical practice. It was really about how do we scale functional medicine?

How do get this kind of care into the wider healthcare system? Because if we all had the choice, we'd all want a functional doctor as our primary doctor, but that hasn't been accessible to everyone.

And so the data has been a big piece of our evolution and also the news that we have to share today. Well, why don't we just get into it because I'm sure everyone is excited to hear.

And, you know, ultimately I think it's a continuation of that vision moving in into the rest of the world. Yes, so exciting announcement. Thank you for having me on to share.

We are now in network. Parsley Health is the first and only functional medicine and longevity clinic that is in-network nationwide for 150 million covered lives, hundreds of commercial plans, and it's really a culmination of my dream and why I started the company.

So it is a huge milestone. For Parsely as a business, Certainly for me personally and for I think the wider healthcare system that is now poised and set up to integrate this kind of care broadly.

That's wonderful. So take us on that journey. You know, because I think a lot of practitioners who were listening to this, maybe, you know feel that they get great outcomes in their practice and you have thought there might be a way to do it.

I feel there's probably, they've seen certain things in the way, right? They've see that insurance doesn't believe in functional medicine and I can't do with the codes that are in Functional Medicine and my standard of care is better and takes longer and therefore it doesn' fit into that paradigm.

Becoming in-network nationwide

But obviously something has happened that has changed those rules. So what's changed? Well, I think, you know, for a lot of functional medicine practices, all of that is fair, and in some cases, true, right?

If you are operating in a true concierge model that's very expensive and working with just a handful of patients at a time, some of those constraints may be real for you.

And so I want to, like, honor that, that for lot people, there are real constraints, functional medicines isn't separately recognized by the payer system.

It is clunky and expensive to manage in-network billing, period, right? It's costly to us as providers. I think what's unique for Parsley is a couple of things and the fact that we've really been building towards this over time.

Number one, we built from day one a scaled model where we standardized the care. We built the first fully evidence-based set of protocols in functional medicine.

We build our own fellowship training so we could train board-certified conventional providers in this medicine, we built tools, data tools that would track outcomes like the Parsley Symptom Index, which is a validated symptom score that evaluates nine body symptoms and which we've published in the medical literature, in peer-reviewed literature multiple times.

and which is validated against Promise 10 to allow us to track outcomes. We really built an infrastructure that would allow to standardize care, scale care and track outcome.

And then later on we worked with an independent actuarial firm, which was a fancy word for a company that evaluates health cost data and showed that Parsley care saves money in a high cost chronic patient population.

Because at the end of the day, the payers are interested in cost savings, right? Especially on the commercial side, or really in every part. But in the commercials side they have their patients or their members on average for like 18 months.

And so there's so much in and out, there is not as much long term. So they really need to show that a service is net neutral or cost saving. You know, quite frankly, only because Parsley was built as a scaled model, ventured back, so we had some capital to put towards some of these problems and questions and this kind of research and validation, were we able to sort of slowly, and it took a long time, Parsely is officially a decade old, as of a couple months ago, this is not overnight.

Slowly, in a cash world, we were able build this infrastructure that was always designed to eventually get here. And in doing that, we also built infrastructure to handle billing.

Revenue cycle management is a beast. It requires a lot of care and feeding and tech integrations and management. it's never perfect. And so we built all of that infrastructure over time so that it could actually make sense for us to do this.

Yeah, that's interesting. My feeling is, you know, what I've heard from other people, I met a guy who worked for United Health for 22 years, who had taken two holistic modalities, chiropractic, to United, and then acupuncture to the New York Health Plan, the Empire Health plan, which serves, seven, New York employees, state employees.

And he said that, you know, in order to get these kinds of things done, You really had to sort of like own the whole infrastructure. It's like they, these people don't want to do it.

Like Parsley has to, sort, of own. The whole thing or an organization would have to. Sort of, own, the, whole, thing to end. Has that been your experience?

Yeah, I mean, for us being able to demonstrate that we have the infrastructure that allows us to build a payer without sort of crushing us. That we the patient volumes, frankly, that the payers care about.

The payors don't care very tiny practices, unfortunately, because everything for them is based on, like you said, this one plan in New York has over a million people.

They're dealing with huge numbers. And ultimately, they also need something that works within the way that they work. And so we had to do a lot over the years to kind of get ready for that.

We had our outcomes data in hand, and we have our infrastructure in-hand, we've had a track record of seeing thousands and thousands of patients in New York in the hand.

Our first health plan launched in 23, which was Aetna, New So one sort of local health plan was where we started three years ago, and that was us quietly building towards 150 million covered lives, but we knew that we had to start with one.

We then expanded to through partnership and without Sinai, we also had go through a lot of hurdles and proof

points with them. They had feel confident and comfortable partnering with a private clinic like ours, a telehealth clinic, although we do have a brick and mortar in New York, which I'm sitting in right now, but we're largely tele-health based.

I had to do so many calls with various people across their leadership on what this medicine is, how it works, its legitimacy, it's safety. There's a lot of hands to hold and convincing to.

And so we did that and then we expanded to a couple of plans in California and the Pacific Northwest and it was just very slow. And then ultimately that foundation, however, was really the unlock to expand much more rapidly.

You know, we couldn't have done it overnight and we could have what we've just done if we hadn't started where we started. Yeah, it's amazing. So what are the disease categories or the diseases types where you were able to show that you outperform conventional care?

You know, where they paid the most attention and where we had the best data were some of these really high cost conditions. Autoimmune is a huge one, right?

While a small percentage of the population, these conditions are extremely expensive, especially because of high utilization of biologic drugs. The biologics can be 30 grand a year.

And because these condition don't go away, they're not conditions that, hey, this year was really expensive. You had a baby or you had any replacement and then it's done.

for employers and for our healthcare system and the payers, these are conditions that last decades, right? So they're expensive for a long time. And so autoimmune is where we have really exceptional outcomes data, one area.

The next one is GI. So everything from the auto immune GI conditions, ulcerative colitis, Crohn's, celiac, and then, of course, IBS, GERD, some of these GI condition, while not auto-immune and maybe slightly less severe, also are very chronic and very costly.

They end up with lots of procedures, lots colonoscopies, endoscopes, meds, and they also tend to last a long time and kind of really gig people through the healthcare system.

Others are the women's health space, so a lot around fertility and menopause. You know, I wish that every single woman would go through The Parsley Program from a year to six months at least before she tries to get pregnant or wants to pregnant.

There is so much we can do to help women conceive on their own and avoid IVF, which is also a very costly and time-consuming experience.

Conditions where functional medicine shows the strongest impact

And for those who need IVf, we support a much healthier end-to-end IV-F cycle and more successful cycles by going through the Parsley program to optimize all these aspects of health.

Mental health, that one also, it's harder to qualify cost in mental health although the world at large has started to do it, so there are some benchmarks there, but we have huge impact on mental health, and then, of course, heart health and metabolic health.

And so, in these areas, different employers care more or less about different ones, depending on what's hitting their bottom line, quite frankly, from a cost perspective.

But what all of these conditions have in common for anyone listening, if you're in functional medicine, The beauty of functional medicine, and what I would always explain to payers in my conversations with them and where I frankly

had the hardest time kind of getting credit or getting understanding, is that functional medical addresses multiple conditions at once, right?

It helps the whole system reset. It help the system improve health status. will address metabolic health and inflammation and hormonal health all in one program.

And so we can think about the conditions, but I always tried to make sure that the payers were understanding to look at overall cost structure, overall health status, and overall system utilization.

Because even though it might take us two years, three years to move the needle on an autoimmune disease, we still would be moving the needle on all these other things in the meantime.

And we would also be move the need on utilization when it came to how many drugs people were on and how much specialists they were seeing. That you could see in data pretty quickly and that was also, I think, meaningful for them.

That's awesome. Yeah. So it's such a great journey. I love the idea of seeing where the most cost is being eaten and then going after those areas. What I mean is super obvious on that end, but the fertility thing is a big deal too.

You know, just been doing some research on the Fertility industry and how it sold and organized. It's a significant cost. Just for context, so this is commercial payers, there's no Medicare, no Medicaid yet.

sort of like the 25 to 65 in commercial plans through employers or through otherwise. Yes. So this is all commercial. This is the 150 million or so commercially insured lives.

These are your United's and your Aetna's, and you're Blue's plans, right? The kind of insurance that you have through your employer or maybe through an exchange, the Oscars of the world.

We are not yet in network with government plans. The Medicare's or Medicaid's are a whole separate conversation, but we think that this paves the way for that as well.

Well, look, I guess before we go any further, just want to say congratulations because you're living the dream that we talked about 12 years ago. And as our friendship has continued over the years in different places and times, it's been just amazing to see you continue to take that ground.

I see that the value of what you've created just continues to compound moving forward as the of the data, validation, relationship capital, proof points, that journey moves forward.

I hope that this is the beginning of another amazing chapter that will come back in a few years and there'll be some other incredible ground that's been taken.

So I just want to salute you on that. I do want to have a slightly awkward conversation with you though, because the people who listen to this are the functional medicine doctors around the country and some around world.

And I think for the People around The world, this will be very exciting and satisfying because ultimately, I Think everyone has dreamt of this kind of moment happening if you've been in this space coming into the mainstream.

But I want to have a conversation about how independent functional medicine clinics should think about this news. Because my judgment, my first flush of feeling is that, hey, if your whole marketing shtick has been like, Hey, insurance doesn't do functional, medicine, you have to go out to do cash to it.

And I'm the guy, that is probably going to be tested a little bit. Obviously, there's not perfect information across the industry, so people won't necessarily know that.

My encouragement over the years has been, we've got to do things locally that maybe you can't get through a

partially telemedicine service, and that looks like One thing going for you is you, the provider, right?

The relationship that you have in your town, you're trusted, your connected, and you know the resources that are there locally. That's an advantage over a nationwide telemedicine center.

Or you've got to do things that maybe partially you can't do. So I've been talking about going after the hardest possible cases, really rough cases where people come in with all the environmental illness.

I've had a particular focus on cognitive decline because that's something that I just feel like is the hardest part of functional medicine because you've got all of these root causes, they're all interacting, you got these very complicated patient cases.

So that has been my thesis. I wonder if you agree and if put yourself in the seat of someone who's now maybe starting a functional medicine clinic or has been doing it for a while reasonably successfully, the ground is shaking underneath them.

Some of it is coming from Parsley Health, and some of its coming AI and Chachi BT, some it's coming Function Health. But am I right in thinking that the groundbreaking is not the same situation as it was 10 years ago?

Just wanted to take a moment to thank our mission partners for helping bring this podcast to you. As you know, we are in the business of building a network of clinics that can reverse cognitive decline and our partners in that are organizations.

You can find out more if you go to goevomed.com and look at the mission But first and foremost, Truenura, if you go to truenura.com, you can get a demo.

This is the underlying software that will connect this network of clinics, and we have an incredible mastermind session, a lot of cool stuff coming out of that company.

You can see here, Fullscript, thanks to FullScript with FullScript, where we're going to help you take advantage of the tools that they have. to compete with things like ChatGBT and Function Health.

It's going to be awesome. Go to goevomed.com slash full script. Big Boost Marketing. If you need patients for your clinic or if you have any marketing needs, go evomed dot com slash big boost is our premier supporter in that world.

And then please also check out Freedom Practice Coaching, built and scaled a very successful brain health practice and has been instrumental in helping practitioners with the non-clinical aspects of running a practice doing this.

These are our mission partners. these are people that I know well, these people are top of their sphere and really excited to bring you the rest of the podcast.

Enjoy. You know, my response to that is a couple of thoughts. First of all, I think that, listen, you're right. It's not 10 years ago, right? It was Google.

Now it's Chad, GPT, and Claude, Right? People are empowered with information. They're able to buy their own diagnostic tests. Parsley has longevity labs nationwide through Quest.

Quest has their labs, direct to consumer. they have a full set of functional medicine labs that you can buy straight from Quest You know, there's a huge amount of DIY in the market.

I'm an advisor to Whoop, the wearable company, and wearables like Whoope and Ora and others are giving people data in a palm of their hands that used to be like data that you would only get in hospital or something.

It's really incredible. And so we do live in new world and we can't hide from it, right? And at the same time, I think that there's not a winner-take-all here.

The market is huge, and the market's only expanding. Search for the words functional medicine in related terms has gone up 300% in the past couple of years.

What the new landscape means for independent clinics

Huge forces around longevity, the rise of consumer health, where something like 90% of Americans now say health and wellness is a top priority, according to McKinsey research.

Maha movement, whether you love it or hate it, or somewhere in between. All of these things are conspiring to expand the market and the consumer base and patient base for all of us.

And what used to be, frankly, when I started, parsley was before its time. this type of medicine was really niche. And in the past couple of years, I'm so grateful to all of the companies and all the providers in this space and to the doctors writing books and the fact that Oprah Daily and Maria Shriver and these folks are covering functional medicine and have interviewed me.

getting this into the zeitgeist and expanding what this idea of whether you call it functional medicine or personalized medicine, or preventive medicine.

Or lifestyle medicine? Or medicine 3.0, right? These are all names for different things, certainly, but related things. This idea that the average person wants more from their health care, they want more, from the doctor.

They want a medical service that is in the loop for all of their Health and Wellness. And so I just think that Ground is shifting and the opportunity is so much greater.

And let's be honest, there's always going to be people. Like, I'm amazed that here in New York City, Parsley Health's, you know, non-covered services fee is $1,500 a year, and then we bill insurance.

$1500. There are people spend these 60 grand a years for a concierge primary care service that they barely use, that is straight down the fireway primary And then those same people buy a $1,500 program at Parsley and bill everything in network because those services aren't doing functional medicine.

And what it just says to me is that it actually sort of blows my mind. But there's this willingness, and people want all sorts of different things. People want in-person care.

Some conditions need in person care, people the kind of very high touch in personal relationship. There's always going to be people who want to spend a certain amount on more of a concierge, true conierge membership or experience, which we are clear at Parsley.

We are at what I call conciers light, right? But we're not the same as someone charging 20, $40,000 a year. That's the different level of service. And there's going be a market for that.

There always will. I just see it as not win or take all. but something where in this growing market, we can build lots of different services that will support all different types of patients.

And then I also think on the insurance piece though, you're right. Like that, the whole idea that functional medicine has to be really expensive and it doesn't take insurance, Parsley is changing that.

Not only changing it, but we have changed that and that while perhaps impactful in the very short run to certain practices, in the long run is only going to massively increase the demand and the awareness of functional medicine and increase, the number of patients for everyone who's in this field.

Yeah, I love that. Well, but okay, so you would sort of agree with my thesis though, that like the, edges, or the relationship and edges are sort where the most opportunity is for a local practitioner, right, to do something there?

Yeah, I think it's the relationship, the level of high touch, level-of-service. I know that in-person clinics, like we have a full-body DEXA here in Parsley, New York.

A lot of in person clinics and functional clinics offer a lot, not sort of, but offer services, whether it is HBOT or IVs or plasmapheresis or other types of services.

I think that there's also opportunity in specialization, right? If you're really a go-to in women's health or a certain type of condition set that you are a rock star at and are really known for that.

And then if you a small concierge practice, You know, your target total patient population is probably relatively small too. And just through word of mouth and delivering great care, you'll fill your Target patient group and you don't care if somebody else like Parsley has 10,000 patients because you want like 200. Good for you.

I'm jealous. Well said. Yeah, well, I guess one other thing I want to share is, you know, one of the things I've been thinking about a lot is the sort of gap in trust between, let's say, the silent generation and Gen Z, right, where still the older folk sort trust their doctor and do it all by the book and probably wouldn't buy parsley health anyway, because they're fine with their current doctor, or maybe they will.

No, they do. I mean, we have so many 60, 70, 80 year olds using parsley now. But I also understand that like, you know, for the younger people who don't really have the same level of trust, They also have experienced like row and hems and all of these things that are like so convenient, like impossibly convenient.

And I guess part of what I've been wanting to share with practitioners is that, to compete in those younger markets, You have to be almost as convenient as those kinds of companies, functional medicine clinic of like all disorganized and all these labs and different systems for everything.

It's not going to fly with a younger user who's used to a high technology experience. That's absolutely true. I do think that younger generations have different expectations of how they interact with their healthcare.

They want it to be seamless, they want to it be easy, They wanted to online, and they wanted it on demand. And services like Hems, Hers, Roe, diagnostic testing services on-demand, even full-body MRIs, right?

I want, I get it. People are willing to pay for that level of convenience and that levels of responsiveness. So I think it does change a lot about the way that practices are run.

And you've done so much around practice technology and, you know, Parsley's built a lots of its own software stack and we're building a whole lot more with AI right now, which is just incredible what we are able to build without that many engineers.

It's just bananas. You know, we've also invested a lot behind that over the years. And yet I think more and more there's tools off the shelf that will also let a practice do that in a relatively seamless way.

But I don't think that you can hide from it because I do think this is the way we all use our iPhones or our smartphones in our day-to-day lives. We're used to having our wearable data in an app at our fingertips.

You're use to that. In your life, you're going to want it in your medical care too, especially if it's a specialized service like functional medicine.

Yeah. Well, your front door has always been quite appetizing for patients, right? A lower cost than in other efforts and it looks cool. But you've obviously taken…

You've seen out in the industry the interest in this sort of like labs first functional medicine right way of doing things

from. function and superpower and so forth.

And you mentioned the parsley longevity labs. What was it that helped you to decide that this was a good front door to parsley and what have you guys built in order to attract patients?

Yeah, you know, we've been running this comprehensive functional lab panel through Quest and LabCorp for a decade, and so when the Quests of the world finally opened their doors and said, We'll allow others to build on top of us, which, by the way, they had said no to for And then they changed that policy.

Labs, longevity, and the human clinical layer

And so what that did was it really opened the floodgates, as we've seen, for companies across the board to build direct to consumer laboratory services on top of them.

I think that's awesome, by the way. It's a huge step forward for the industry to make these tests more available. Quest also makes them available direct to consumer, too, so you can buy direct from them.

And what it does is allow people to get some data and get intelligence on their body from a functional perspective as a stepping stone into care, right, for us.

What we did is we didn't just launch labs. We actually launched labs plus a lab review visit. So the vast majority of people who buy our labs product don't buy just the labs products.

They buy the lab product and a 30-minute lab Where in addition to the lab results that we review, we view an intake when Parsley's intake is quite specialized.

We're looking at our symptom score. A lot of diet and lifestyle and clinical history. And so what they get is one of our amazing board certified, highly trained clinicians.

reviewing their labs, telling them what their lab's mean and telling what to do with that. And so even though that product, combined product of lab plus visit is more expensive than the lab alone, it's a better seller than a lab because I think at this point you can kind of get labs anywhere and there's not really much you know, differentiation or sort of moat around labs, which is, I think, a problem for the businesses selling labs.

But it's good for The Consumer because you have Brian Johnson, like, offering labs at cost, you, know across the board, or you've companies like Whoop and Aura offering Labs, it just great.

But I think it's really for us, we see parsley as the missing clinical layer in this functional health and longevity ecosystem and coming in and offering this lab review visit and as part and parcel of the labs or on its own.

So we actually offer this visit as a standalone and people can bring any lab so they can our labs doesn't matter to us and we'll do this review visit and go over those labs with you and give people an action plan.

Because what I see right now is whether it's wearables or biomarkers or genetics tests or MRIs, people are awash in data, like they're swimming in date, but they don't have answers and they And so they get the data, then they got the AI report, and they pop that into Claude or chat and get a review of that.

Then they're sort of still confused. And then, they take this to the regular doctor who shrugs or doesn't have time or isn't trained to deal with all of this.

They just don't do anything from there. I can't tell you how many people bring me and show me their lab results, And they are so proud of their biological age, whatever that says from whichever platform.

from there literally are like, I don't do anything with this. I know what it means. Can you tell me what I mean? You know, what you're really reinforcing that I just want to maybe finish on is that it's the human at the end of the day,

right?

It's you having that conversation with them and synthesizing it and believing enough in them to get them move forward with something that they could have moved forward without the technology.

It is on the whoop. Some people will be able to do it from that. But I think the middle of a bell curve still craves that relationship. And that's why the patient-provider relationship is the center of functional medicine.

That's what I called the show the functional forum because here was a common language that had put the most important thing first. And I just want to honor that in a world where you could have built something that like really divorced the human, you put the humans at the center.

And, I want just to you for that. Thank you. It's way harder, it's much harder to do this by the way. Some days I wish that I had. Call me other way because my life would have been easier.

And all of these companies and Parsley are part of a broader solution. I think this news for us being in network for 150 million people for me is really about Parsely, yes, as a business.

It's about a culmination moment for you personally. This is what I set out to do. And then it's also about how do we march this kind of medicine straight into our health care system and begin to shift the health-care system at large in a meaningful way?

And so my hope is that, you know, our healthcare system that really only does recognize the true clinical medicine recognizes providers, recognizes covered services, that this is sort of a wedge into that system, That will reverberate across the system in interesting ways.

And, so let's see. to see. Last question, are you hiring? Oh my gosh, always. Do you need doctors? Do any practitioners? Like ultimately, you know, I can imagine.

The dream for so many practitioners is just to like be part of something that's working. No, we are hiring MDs, DOs and PAs, PAS, functional RDs. We go in waves of hiring.

So sometimes you might connect with us and we might be all staffed up and other times we may be hiring and so we love to keep relationships strong and meet providers even if we're not actively hiring right now.

We also hire 1099s, so we do hire and train our 1090s when we don't need or it makes sense to in addition to like our W-2s. So we did both. Most of our providers are W2 and some are part-time, some a three-quarters time, and then we also have a group of 10-99ers and it just really kind of rotates across and sometimes the 10 99ers join Sometimes the W2s become 1099s, right?

I love being able to provide this sort of flexibility here. And we have a lot of female providers. I know as a woman who trained in medicine, I didn't personally, 15 years ago when I was in medical training, imagine that I would have a job where I could work from home or that I'd have flexible hours, I mean, on the clinical side.

And so to be able to provide that for our providers, don't get me wrong, people work hard here and we are busy, but there's also a lot of support here, and there is a lots of flexibility and it's nice to have created that environment for doctors and for NPs and PAs and other clinicians.

Yeah. Well, just thinking back to the journey that I know that you took to get to start Parsley, I see that your, you know, providing an incredible service to rest of the community to really understand how to do this in a healthy way.

and so many of the resources that you built early on, which is really the chassis that everything else has sort of like, you know, come from was so critical.

Robin, such a pleasure and honor to just witness your journey over the last decade plus. I really appreciate our

friendship, really excited to pop up somewhere else in the world and see you again.

And thank you for your pioneering work and thanks for being on the Evolution of Medicine podcast. Oh my gosh. So glad to see you and appreciate you, and our friendship over all these years.

And thank you for having me on today and sharing this news and continuing to do what you do for the field. More to come. someone who needs to take their practice to the next level to be competitive locally, someone you may have sat next to in a conference who you just want to chat about this.

I'm feeling compelled to set up some times to hold court with practitioners who want talk about what it means because I can see that this is a big moment in the evolution of medicine and a moment for Parsley Health and for you and your practice.

Thanks so much for tuning in and we'll see you next time. So that was the podcast. What an epic session. Thank you so much for tuning in to the Evolution of Medicine podcast, we'll be back again next week.

And thanks so