Future Self and the Podcast Intro

Yeah, we don't have to find normally what happens is I'm here. I've got this problem in the present I want to get to the future. Yeah, and I'm trying to think I'm trying to solve a word where I want to get to the future with today's skill set Yeah, which is impossible.

Okay, so what I've learned is no the future self can draw us to that No as a doctor doesn't that sound a little creepy? Totally crazy, but at the same time, when you tell me that, I'm like, that's exactly what it is.

That is the key right there, is become your future self right now. That's the only way it's going to happen. Yeah, one of our favorite books, be your future self now.

Yeah, exactly. Right. You didn't build your clinic to feel like an employee in your own business. I'm Matthew Calogli, and on Out of the System, hosted by Dr.

Talks, we challenge the broken rules holding healthcare entrepreneurs back. Hear from clinic owners, rebels, and builders who are creating bold, profitable patient center practices and doing it their way.

Dude, I can't wait to have this conversation. Like, we were just talking offline. I mean, I know we can't talk numbers, but I am really looking forward because, you know, we get a lot of pain anesthesia, pain management anesthesia.

Anesthesia pain, thank you. It's been a long day. I had a consulting day today, so I'm cut, you know. But we get a lot. We're getting a lot in your industry that are contacting us.

And I'm sitting here with Dr. Ashu Goyal, who is like the man. He did my back two years ago. How are you doing? Nominal one treatment one treatment. Yeah, you can people always ask me what was going on and we can talk about that like here Osh has made the journey you still have an insurance practice, right zero Oh zero where a hundred percent insurance free as of January 1st, there's no insurance.

There's no United Health Care No people telling me how to practice medicine what I'm worth what I'm gonna get reimbursed if I'm gonna get reimbursed None of that.

What's it like? Liberating incredibly free man. Like I've never seen you smile like this. I've known you for years. You met me. I was a stressed out mofo man.

Leaving Insurance and Building a Cash Practice

I was so stressed out because I didn't know what I was doing and I didn't believe That I could get to the other side, you know, and we crossed paths. I believe that was in 2023 at IOF in February, it was here.

She got the book, she came back, she being Nikki, your wife, right? Exactly, so yeah, I was there talking to Alicia, and Alicia said, oh, here's some books for free.

I picked up the book, I'm like, what's this about? She's like, oh, you need to listen to him speak, he's amazing. I'm like, okay, when is it? It's Saturday afternoon, we had a wedding to go to, so I couldn't hear you speak, but I took the book home, gave it to Nikki, That was a Thursday night.

She read the entire book overnight. And she's like, you have to meet this guy. You have to meet this guy. I'm like, well, he's speaking on Saturday. Maybe I'll see him Friday.

I didn't run into you that Friday. And then Saturday, we had to go to a wedding. So I missed a conference. But I

think that Monday, she reached out to your team and said, what's up?

How do we make this happen? Like we need help because we were so far in the insurance based model. And I was incorporating the biologics and the cash pay at the same time, but not doing it well and not doing it right.

Right. And we had consultants who were insurance based consultants. And they didn't understand the cash pay business. So they were kind of pushing us into their traditional pain management bucket where it's like, you know, the way you want to do this is you want to have a nurse practitioner.

He or she is going to see 30 to 40 people a day. You're going to be in your room. You sit in that room and do shots. That's that's your MO. You do 40 to 50 shots a day, five days a week.

And then you have a urine lab. You have the nurse practitioner, he or she writes narcotics all day. So the patients pee in a cup. You get paid for every urine sample that you take, which is a requirement for people on narcotics.

And you can make millions of dollars doing that. I was like, yeah, that's not me, man. I don't resonate with making money off urine, especially writing narcotics all day and making money off urine.

And you trained in Cleveland at… Cleveland Clinic. You did your fellowship residency. I did my residency there and my fellowship there, yeah. Yeah, you're highly trained.

Let's go back. So, med school, you come out, you go on pain, and you go to Cleveland Clinic. You come out and you went down a traditional path, didn't you?

I did, yes. You were like making really, you're making bank. Oh yeah. Right? Like in the traditional pain management, anesthesia pain, right? Tell everybody.

Made a great lifestyle, yeah. So I finished my, so I did my anesthesia residency, finished in 2006. That was at Cleveland Clinic. I stayed there from 2006 to 2007 and did my pain fellowship.

At the time it was a top ranked pain fellowship in the country, if not the world. Okay. Which is great. So I love it. So you're like, I got into this.

I'm I got this. Yeah, I got this. So I did a year of private practice in Columbus, Ohio, after not seeing the sun from November to April. I was like, I can't do Ohio because they offered me a partnership track.

Right. Like if I become partners in this business. I'm married to Columbus, Ohio for 20 years. Nothing against Columbus. It was just cold gray and ugly from November to April.

I was like, I can't do this. This can't be my day in and day out life. So I moved to Arizona in 2008, joined Valley Anesthesia and Pain Consultants, large anesthesia group.

There's over 200 of us in the group. They had a small pain division and I practiced traditional pain medicine. So this is epidural steroid injections, ablations, cortisone shots, medication management, spinal cord stimulators, intrathecal pumps.

I was doing that to a very high level. I built a following here. I call them goyle heads. So that's my referring docs and my patients. Shave my head. I just need to know well.

I had hair back then okay, all right Yeah, okay. Yeah, this didn't happen till I turned 40 so wait before after you met your wife. It was after a minute, okay?

Well, she's the one who said just got to go cuz like I was I had hair and there's like ball spots Yeah, and she's like, huh? No, I'm not doing it not hot I take that off.

You got all these goyle heads, right? Yeah. So I had a great practice thriving in 2015. The senior partners talked us into selling to private equity, which was a great deal for them.

For us junior partners, it was like, and so they got their golden parachute. We got stuck. So we're in this corporate medicine, private equity backed model where it's volume, volume, volume.

It's not about patient outcomes. There were no visionaries looking to see where we wanted to be in five years. It was like, let's just build this up and then sell it.

But once we had sold initially, we all became employees. So you're not going to get a bite of the apple when they sell again. No, not at all. Right. We're stuck.

Right. We still made a great living by anyone's standards, made a great living. Yeah. They're paying you really well, but it was still very unfulfilling.

Right. Right. Right. So we went from innovation, having a leader who was, you know, thinking, how do we become the premier practice, not only in the valley, but in the state, west of the Mississippi?

I mean, that was, that was Dr. Aubrey Maze's vision, you know? We went from that to quarter to quarter budget. How far below budget can we get? Those were our business meetings and it was so like soul sucking, you know?

That is just not like they're obviously working with doctors for 11 years now, right? Yeah. That's like the last thing in the world you all want to talk about is quarterly.

P&L statements. It's important, but if you're running your own business, it's kind of important, but at the end of the day, there's a bigger picture involved, right?

It's about taking care of people. It's about legacy. It's about legacy, man. Exactly. It's not about empire. It's about legacy. Well, the legacy of that pain practice I left, so I left them in 2021 to open up my practice, my dream practice.

And you left a really good comped gig. Oh yeah, we were good. Two months of vacation a year and a good salary, benefits, all the good stuff. You left all that behind to go up to debt in your eyeballs.

You have no idea, like Nicky and I burned through it. No I do, I've seen your piano. Oh yeah, that's right. Oh my gosh, in October. Okay, so I opened up the practice June 21, heavily insurance-based.

It's terrifying, right? Because, I mean, I'm not the guy who hangs up his shingle and says, come see me. I'm like, I was blending in, just doing my thing.

You didn't have a lemonade stand as a kid? No, I was an entrepreneur. My dad was. Your dad's an entrepreneur? Oh yeah, yeah. He started his own business in the early 90s and did really well for himself, yeah.

But it was kind of necessity is the mother of invention. And so he kind of got forced into creating his own business. And that's how it happened for me, too.

I was so miserable in my corporate medicine back job that I just couldn't do it anymore. So once my contract was up, I'm like, I'm jumping ship. But everyone I talked to in the valley who was doing their own pain thing was doing very traditional pain management.

There was no There's no healing. I didn't feel like there was soul involved. I'm not saying that these guys aren't soulful people. Doing epidurals, just masking the pain, not really fixing it.

You got it. You got it. And I was like, I've been doing that for 14 years, and it's so unfulfilling. It's like episodic care. I do a shot, you get better for three months, and you're back.

We do it again, and we just keep on doing this. Then five years later, your spine is so degenerated, your only option is a fusion. That's not going to work, because that's not the issue.

It's not a stability issue. You're not fixing anything. Exactly. We're not fixing anything. So I opened up my practice in 2021 with the hopes to build something where people could come and actually heal their bodies, heal their spine, heal their joints, and have longevity.

But I started off in insurance-based medicine and I got sucked into that for like the first two years until I met you. Yes, it was June 21. You were drowning when I met you.

Oh, yeah. Oh, yeah. It's so bad. This is where I wish Nikki was here to tell you how bad it really was, because she's like, you don't even know how bad it was, because she was running the business side of things.

No, I remember having conversations with her. I mean, you had a crap ton of debt. We had a crap ton of debt, and we're burning through our savings because we weren't collecting on insurance.

And that's the thing people don't understand. When you start your own medical practice, the money comes out of our own pocket. Whether we borrow it or it's our savings, we have to pay for the care that we're giving.

Someone's got to pay for it. You're paying in advance for it. We are. Exactly. The patient comes in you get paid whatever forty five six thirty forty five sixty days.

Maybe maybe you get underpaid We just got paid a hundred and thirty four dollars from United Health Care for a consult I did in May of last year May of 2025 We just got the check those yesterday those bastards are making just cast it.

I'm like, are you kidding me? Like that's almost a year later to get paid a hundred and thirty four dollars for an office visit How was that even sustainable as I clawed back in 60 days?

They could they could, you know, we actually closed the clawback account. So there you go. Yeah. Good for you. There's all the whole process involved there that, oh man, it's such a dirty business.

It really is the insurance game and they devalue us. So anyway, they did that for a long time. I was hardcore in orthobiologics. I got turned on to the When did you start doing orthobiology?

2017. So you were doing it in the big practice? I was trying to, but the problem was I knew too much about it, and they wouldn't invest in the materials I needed to deliver high quality PRP.

You're a perfectionist. Exactly. He was like, I can't do this to people. Like, yeah, sure, you're going to give me a $40 PRP kit, test tube PRP. I just learned that that's crap.

And this is all the way back in 2017, 2018. I'm like, I can't do that to people. Maybe you got a billion cells, if you got lucky. If you're lucky. I did a couple of cases, they all went well, but inside, back of my head, I'm thinking, George Chang-Chang is like, what are you doing, man?

That's not how you do PRP. That's crap. You know, you need to get a nice volume of blood. You need to get the right platelet count, platelet dosing. I mean, this is, gosh, that was almost 10 years ago, right?

Yeah. So in 2021, started my own practice and I started focusing on orthobiologics the right way. The problem was I just didn't know how to do it. Like, I had no mentorship in that field, right?

From Corporate Pain Medicine to Private Equity

Because going through medical school, going through residency, joining a practice, you don't learn the business side of things at all, you know? So I relied heavily on these consultants who were really good at the insurance

game.

But don't know a thing about the cash side. No, I knew about the cash side. That's like me going into the insurance game. Yeah, all our meetings, like, they just didn't get it.

They weren't getting it. Like, Nikki was banging her head against the wall. They're like, look, we're not trying to do what your traditional pain management People are doing they're killing it like they've got really successful pain practices in the valley actually all over the country good for them They're doing really well good for them.

Yeah. Yeah, it's just that's not my that's not what I resonated with like that's there to me There's no soul in that for you said like you just said something like when I think about you And I talk about you and Nikki a lot, right?

In with our prospects are just telling the story to me you what you helped me understand Because I was coming at it from a bit of a hey, let's grow these things and sell them off, right?

You and Nikki really helped me understand that this is about legacy when you and I were in your house I can't remember what time I've been in the house so many times right when we were over there.

I don't know. There's a bunch of us over there. Yeah We're having back then when you and I drank when we were having some really Ash's got a great wine.

He's got a lot of wine collections It's in it's probably not getting any smaller because I know you don't drink that much. We don't drink anymore Yeah And you were saying you said something when you told me that you left the high paying gig and you gave me a range of what you were making The house is gorgeous.

He's like, yeah that he think I afforded this house because of this blood that work not because this work Yeah, just start with us and then you said something of I don't want to stop seeing my patients.

I give them my personal cell phone and it hit me, bam, right then and there. I'm like, this is about legacy and healing. Like it really changed me because I admittedly at that time was probably like, oh yeah, you can exit the business.

And I realized for doctors, for a lot of them, an exit means only seeing four patients and spending like two hours with them or an hour with them and giving them their cell phone if they have any questions.

Like to me, that's what healthcare should be. That's what I feel it should be. That's what works for me. When I was leaving the private equity group, and I was talking to my friends who were killing it in pain, and they're like, dude, you come to our practice, you fit in really well, and you'll have great opportunities.

We want to sell in five years, you'll make bank. In my head, I was thinking, imagine building something you don't want to get rid of. I could never imagine selling something that I built.

That's what that's where I am like I'm building something. I don't want to get rid of right like I love like especially now I'm raising your kid and getting him through college and selling them off Yeah, exactly kind of yeah, I mean, I mean, you know, but if you build if you build something you love right?

Yeah, and that's what Nikki and I have been able to do like we've got a practice We love like I can't tell you how many times people come in there. They rave about our staff.

They're like you guys have the best team And we do. You have a great team, including the dogs. Yeah, and the puppies. Yeah. So we have DaVinci and Luke Sheena.

Yeah, they're with us at the office all the time. And they're a big hit. I tell you what, like after procedures, they'll come to recovery and sit in patients' laps and they just pet them like…

Imagine doing that with a venture capitalist group. What are you doing? Some guy in from New York. Where's the slide? We should charge for that. Bc man, but I was like, you know for me it was all about building something.

I don't want to get rid of Yeah You know and that way if it ever comes to selling it like you're gonna have to give me a lot of money To make me want to not to want to want to part with it.

I can see you and Nikki doing this to like you're 80 I don't think Nikki would want to do that. Well, yeah, you are older than her, so you'll be 80, she'll be whatever.

I don't think she would want to do that, but for me, yeah, because I love the patient care. I mean, like yesterday, I saw four people, you know, which is amazing.

That's a full day, though. Four people is a full day. Yeah, I spent almost an hour to two hours with each patient, you know, so yeah, it was a profitable day.

Yeah, I know you're not gonna talk numbers. Well, not yeah, that's that's fine. It was a good day Yeah, is it safe to say that you did better that day than you would probably do in a week and a half of insurance care Oh, yeah two weeks.

Yeah easily. Yeah. Yeah, and the patients are happy. They're happy But you know what Matt you said something to me in the very beginning once I finally started jumping on the call So we connected in February of 23 took you what six months to get on the calls.

Oh No, a couple of months. I think it was May. I think it was like April or May. You and Shakhtar threatened to like tie me up and beat me or something.

Yeah, it was something like that. It got violent. So I'm like, maybe I should jump on a call. So I did. But you said something during one of the first few calls that really struck a chord with me in a positive way and really kind of made me reframe what I was doing and how I was building.

You're like, build a practice around the outcome. not the procedures, not the methodology, but around the outcome. And that really resonated with me. I mean, that was so profound.

And I listened, I don't think I got it, but I listened and it stuck with me. And now I look back over the last two and a half years and that's exactly what we did.

We built the practice around an outcome. It's not about the procedures, it's about where is this person going to be in six months to a year from now. It's about that outcome.

And then we work backwards. And that's how we built the practice. When you focus on the outcome, and so the problem with medicine today is it's because it's been overrun by venture capitalists.

It's not about the outcome at all. Like you said, it's about the 90-day numbers. It's about the metrics. And if I could go back in time, so I've been involved in medical space for 11 years now.

God, no, 12. Shoot, it's 12 years now. And I've been working with doctors since, like, growing their businesses since 2018. If I could go back, I made a lot of mistakes for like the first three to four years, because I just assumed that doctors wanted to sell.

And I spent way too much emphasis on P&Ls and balance sheets and all of that today. So I had a client in today. She's anesthesia pain. She's in Tampa.

She's starting from the ground up, left the group, right? That kind of thing, leaving behind all the stuff you were doing. And she's scared out of her wits, right?

And I realized not to talk numbers with her, because it scares her. And what we did is we spent two hours today talking about the outcomes and the vision.

And she's like, well, I don't want to sell. She goes, maybe I'd like to have a couple of locations. I just, I want to be able to use the money from this to do some work in Alzheimer's.

I'm like, yeah. Right on. Let's use the business. Let's run a profitable business. Yeah. So that you can go fund the thing that you want to fix in the world.

Exactly. Yeah. Right? Beautiful. You know what I mean? Yeah, I do. Like, it's been such a revelation in these last, well, these last 15 months, really.

Like, we'll talk some about that. But it's just been so much fun, like, to realize Your brothers and sisters in the medical space really don't give a shit about golden parachutes and all that.

They really care about the patient. Yeah. Most do. Yeah. Most do. At least our circle. Yeah. And they're incredibly frustrated, right? What do you say?

For sure. Yeah. Because, I mean, insurance is like a ball and chain. It shackles you. You can't help people the way you want to. Like, I'll give you an example.

Today I saw a really nice woman. She's been with me for a long time. She's been with me since my Valley, my previous gig, and followed me to this place.

She's got UnitedHealthcare Medicare Advantage plan. And, you know, she gets one epidural a year, you know, she's like, we talk about biologists, but she's like, you know, epidural works I do great I'm working out I eat well I'm super fit for she's like 78 now I think she's in great shape and we would have to play this stupid game every year once a year so okay I think you need an epidural have you done physical therapy done it for 10 years.

Well, you got to go back because your epidural got denied because there's no documentation of six weeks of physical therapy within the last three months.

She's like, I do my exercises every day. She's like, and when I go, I've got to pay a $75 copay every visit. I'm like, you got to do it. So anyway, that was a protocol.

physical therapy for six weeks while she's in pain. And we got it down to the point where like by last year, her last epidural was almost a year ago. She would come to me after the six weeks of physical therapy.

She's like, my primary care sent me to physical therapy. Here I am. She's like, can we try to get the epidural approved? It would still take two to four weeks to get it approved.

It was a process. We do her shot. Well, she came in today. Now I'm insurance-free. She still has that UnitedHealthcare Advantage plan now, but I'm insurance-free.

She came in. She's like, my back pain's back. I'm like, I'll get you in Wednesday for your shot. And she's like, yes. Yeah. Yeah. Yeah. It's amazing. Yeah.

You know, and instead of her spending like an additional $1,400 on like physical therapy, right? And she's going to the gym every day. Right. It is really, and we'll talk about this transition, because I think that's the hardest thing Isn't it the hard, is that the hardest thing for doctors to understand is that people will pay out of pocket?

So, or what, let me rephrase that. What was the biggest, like, let me tell you about it. So, you know, throughout med school, med school is all insurance-based.

I didn't get exposed to any cash-based services throughout medical school. Did an internship through University

Hospitals Case Western in Cleveland. Didn't get exposed to any cash-based services.

It's all hospital-based medicine. All my rotations were inpatient. I get to Cleveland Clinic, it's anesthesia. All our billing, all our reimbursement is cash pay, except for the plastic surgery side of it.

We didn't really get taught the business side of that, but we do rotations through plastics. We learn how to take care of people on an outpatient basis for those types of surgeries.

All insurance based otherwise get to pain fellowship. Everything we're doing is insurance based, right?

Creating an Outcome-Based Practice

There's no it's not this notion of cash pay and the people will actually pay cash for their services the ones that the Cleveland Clinic would do it were like The royal family would fly in and pay for a liver transplant and they get they go right to the top of the list and pay for a liver transplant So that one my head would oh, that's what cash pay.

That's what cash pay is. That's the royal family It's not for an epidural. It's not for a stimulator. It's not for this procedure. It's not for an office visit So, fast forward, what, 14 years later, about 2017, when I started learning about orthobiologic, and those are cash-pay services, I got introduced to physicians who were doing this at a very high level, who were charging cash and getting paid for it.

It was still so foreign to me. I tell people, It's like they get us addicted to insurance, like an addict would get addicted to heroin. Yeah. Right? That's exactly what they do.

And so the challenge I had when I met you was you were trying to like cut the cord. I'm like, dude, this is a slow ween, man. For me, anyway. Yeah. Because I don't know how to do this.

For most it is, it's a 24-month run. Yeah. Exactly. And I try not to even tell them, because if I tell them it's 18 or 24 months, they're like, no. And then once they make, I always tell them, once you make your first $50,000, you'll understand.

Like it's 18 or 24 months. But yeah, keep going. Right, right. Exactly. I liken it to, I tell clients, I tell other docs, it's like weaning off a heroin, I imagine.

It's hard. And you go through withdrawals, you're like, whoa, I'm charging people money. That's a mindset shift. And that's where your work is foundational, man.

Thank you. I tell you about this all the time. Really, we wouldn't be here where we are today without you. Oh, thank you. And the work you did. And a lot of it was mindset.

you know, like understanding like our worth because we get so devalued as physicians because our value is determined by CMS, the Centers for Medicare and Medicaid Services.

They decide what we get paid and insurance companies base their payment off what Medicare says we should get paid. It doesn't take into consideration any risk, our overhead, the quality of care we deliver.

It's like this is what it is. For a high-risk procedure, here's your 300 bucks. Well, that doesn't cover my nursing staff, all my equipment, my supplies, my salary, my malpractice, all of that.

We've done the math. It doesn't cover it. That's why you have to make it up in volume. And that's why all these docs are doing 50 shots a day. Dude, that's not good care.

No, it's not really slick and really good at what you do. Like I was, I was in that world. I did that for a while. You know, I did that for almost 12 years.

You know, I was in that high volume, you know, acute care, just man, needle jockeys. We call ourselves needle jockeys. You're really good with the needle.

I mean, you did my back 21 shots without sedation to without sedation. But, you know, getting back to your question though, it's a whole different concept.

It's a whole different world. It's like being addicted to heroin and trying to come off of it, right? It's just got to be a slow wing for some of us. Some people can cut the cord and they do great.

I wasn't that way. For me, it was like, I have to understand the process here. I have to see it. And, you know, we did it right. And you coach us along with this.

You know, in October of 23, That's when you eviscerated our financials in front of all, it was a group of strangers. In San Diego, I remember. In San Diego, yeah, who now become really close friends of ours.

They're all your favorite close friends, yeah. They're amazing, yeah. And I look at that room like, wow, there's some pretty amazing people in that room.

But they were all so supportive. Yeah. I was like, dude, I don't care. We need help. Yeah. Like, here you go, man. Just do it. I'll take it. I remember when I saw how much debt you guys had, I went, ooh.

Oh, yeah. Yeah, I couldn't dude so and I saw the debt service is like oh my god. They're never gonna get out of this I'll never forget man like you're like Osh your practice is in the ICU.

You're on full life support They're doing chest compressions or swirling the drain if you don't turn this around They're gonna take your house your life insurance policy your cars all your assets because you can't pay your loans Yeah, I'm like yeah, not only that I can't pay payroll Yeah, and you haven't paid yourselves and God knows how we hadn't pay ourselves for like four months.

Yeah. Yeah, we couldn't Yeah, it's like either pay my staff or I pay us We couldn't do both. Yeah, it was that bad. Yeah. And then you were like, listen, your options are listen to what the consultants are doing and do a traditional pain practice and see 50,000 people a day and burning churn and put them all on drugs and have them pee in cups or drop insurance.

Raise your prices, because at that time, what were you charging for back? Oh, gosh. $2,500? $3,500? No, I lost so much money in all those cases. Yeah, lost so much.

What are you charging now? Give everybody an idea. Whatever you feel comfortable saying, like, you know, I know your private guy. So here's the thing.

I don't charge for a procedure. Now it's about a package and a program. Yeah. Right. So, and you helped me understand that. Right. Cause I mean, I didn't understand what programs were.

I didn't under, and that whole concept isn't, we're not taught that. Right. You know, and I met you in 2023. How old was I then? I was 40. I was 40, uh, 49 when I met.

Yeah. 49. Right. And so, I mean, you're talking about some serious reconditioning there. Right. I mean, there's some 15, 20 years of the system. Exactly.

Yeah. So to change that was really, really hard. I lost my train of thought. That's okay, but yeah. So now, how many procedures are you doing a month approximately?

Oh, great question. Oh, I remember. We're talking about programs. Yeah, yeah, yeah. Yeah, so really getting back to the programs. So people aren't buying the procedure, they're buying the program.

I just have the phone on the way here with a young woman who's She's trying to understand like what it's all entail. She's like, I'm 100% on board with the procedure.

What happens afterwards? She's like, am I just going to be left alone? I'm like, dude, no way. You got my cell phone? Yep. Like you get, we're going to be doing adjunctive modalities, laser treatments.

I communicate with your concierge physical therapist. weekly like we're in this together like I go on this journey with each client together over the next six months even up to a year for some people you know I'm as invested as you are in this you know because I want your success I'm not doing I tell people like your thousands of bucks ain't gonna change my life like that's not life-changing equity for me right you know but what is in six months when you're like oh my god I haven't felt this good in years and then you send me your friends yeah Yeah, that's what's going on.

Do you primarily grow it through referrals? Yeah, it's mostly referrals. I have a handful of concierge physicians, physical therapists, and chiropractors and naturopaths who send me people.

But a lot of what we're seeing since we've dropped insurance since January has all been this person has such a great outcome and they're just sending their friends and family to me.

And that's what's been going on. And that's the way it should be in this to me. I mean, I'm fine. I have clients that run Facebook ads to webinars and it works great, right?

But really, if you're getting great outcomes, we call it the seven-star experience, right? Exactly. How do you become highly referable? Well, you become highly referable by giving them yourself.

That's an option. It's not the requirement. No, no, of course. I like communicating with my clients. I've got really fascinating people. My phone has…

I get text messages. Wait, didn't you treat one of the guys in Bruce Springsteen? I can't talk about that. Oh, wait. But it's on your Instagram. It's on your Instagram.

Yeah, I know some people. Okay. Yeah. Yeah, you know, but I mean, it's great. Like, I'll see a text message pop up. I'm like, that's pretty cool. Like, yeah, I mean, it's just it's an honor.

It's a privilege. You know, it's humbling at the same time. But I'm very confident in the programs that I've created, you know, and I know people will get better.

They just have to, they've got to do the work. You know, like with orthobiologic, it's not only is it a procedure, but it's also participatory. Right.

Like, you know, we stress this all the time. It's not just, I tell people when you're considering biologic therapies, you're the pharmacy that's making the stuff I'm going to be injecting back into your body.

So make it good. But you also have to make the environment good. So what are some of the things you have people do? I know you have them do HBOT. That's a big deal.

I love hyperbaric auction therapy. Not everyone can do that. It's a nice to do. It's not a need to do. But I would say about 90% of my clients were able to do it.

And they love it. Some keep on doing it. Like I do hyperbaric every weekend. I'm at the Venice Air facility. I'll pop in there and I'll see like three or four of my clients that morning, you know.

And it's great. Because they're still committed. So you don't have the HBOT in the office. You're outsourcing it to somebody else. That's a big thing for people to understand.

It's like, no, you don't have to go have all this equipment. No, no, you don't. And for me, I love collaboration. And I look at, so there's one person I refer to for hyperbaric in this town, Dr.

Kerry Burdenko, Benesir Health. She's extraordinary. She's just an absolute, she's wonderful. But she's also a master. Hyperbaric oxygen therapy like she's an expert in the field.

She understands the dynamics. She understands safety She's got two technicians in the room at all time. There's always a physician on staff as well and I love going into that room unless you like something from 10 from whatever Space Odyssey exactly like six of them lined up to yeah metal tubes, but you got four of them there and for me It's like look if I if I can't do something as good as someone else I'm just gonna refer them there As an anesthesiologist, you know, at Cleveland Clinic, we had a ketamine clinic.

Like I could run a ketamine clinic, but there's another group in town that has it so dialed in, like I've met with the doctor, he's phenomenal, he's deep, he's soulful, he understands the whole process and what's happening on a deeper level, not just the chemical level, but also a deep spiritual level.

And they've got the whole facility set up to support you when you do that. So it's not just pain management, it's like mind-body medicine at the same time.

Wow. I'm too busy to do it that way. Like for me, it'd literally be you're going to be in a room and you're going to be getting ketamine, you're going to be tripping your balls off in there.

That's not cool. So because we were talking about that and entertaining that because it would be an easy thing to do. But if I can't do it as well as those guys, I'm just going to refer out.

Right. So that's what I believe in. So those people who are listening, who are thinking, oh, I want to do this, I want to do this and this. If you can't be the best at what you do, Each one of those things and I don't recommend doing it then you know, you haven't do physical therapy Are you still doing IVs and things like that?

Yeah, we do lasers. Exactly. Yeah. Yeah, we have an MLS laser. So that thing is amazing I read look, I don't know much about the machine. Yeah, but like I hear what all of our and I've used it Obviously, I hear what all of our clients say.

Oh, yeah Machine we're see from CE lasers. It's the M7 whatever we have the M7. Yeah, it's a frickin every like 80% of our clients. Oh, yeah have it Oh, yeah, like it's a game changer with the box.

I mean, so I just did I did a webinar with Colin Rigney and Ryan Martin and it was all on the on the MLS laser and photobiomodulation and You know as I was preparing for him like this device in and of itself is regenerative Yes, even without shots and what's great is like I explained that to people like look you could do these biologic therapies Or you could do laser and do all the other protocols without the needles and some people don't like needles now And so I'm like you don't have to do needles like we don't have to do shots.

It's great But here's to your tools that you can use but you have to invest in them. You got to be committed to doing this Yeah, our laser is booked, man.

Like today I had soft people today too, but they all signed up for lasers and my team was like, we can't get them in till for two weeks. Wow. Like, yeah.

And we were on the laser from seven to four 30 Monday, Tuesday, Wednesday, Thursday, and then half a day on Friday. And their 15-minute session, it runs all day long.

How far out are you booking for Biologics Procedures? Middle of March. Yeah, because we should… Okay, so to put everyone in perspective, we're recording this for the beginning of February.

Oh, yeah, yeah, so… So six weeks. About four to six weeks, yeah. Four to six weeks, you are booked out four to six

weeks. Oh, yeah, I got no room. There's no room, yeah.

And for the record, I want everybody to understand, again, he's not charging $1,000, so this isn't because of volume. You're you're charging higher prices than yeah, yeah significantly.

Yeah, I mean I'm in Scottsdale's a premium But I'm also delivering a premium service. Yeah, this isn't a shot. You're not paying your shot. You're paying for yeah your outcomes But look you're structuring what a lot of our other clients do and they're charging this I have some that charge more that are not in places like Scottsdale like yeah rural towns, right?

Oh, right, right. Exactly, yeah, for sure. And that's what's comfortable for you, and that's what you feel is good, and you're making a good living with it.

Yeah, we're good. Yeah, we're good. Yeah. I mean, I think that people have the potential to make a lot more money in insurance-based medicine, but I think that comes at a cost.

I don't think so anymore. I mean, it has gotten so bad. Maybe it has. So it's been really fascinating for us. Something's happened in the last year in the medical industry.

I think last year when the head of UnitedHealthcare got assassinated in Manhattan, So to put this in perspective, this year at A4M, there were 10,000 attendees.

The year before that, I think there were 5,000 to 6,000. This is what I was told. So in the functional space. If you start to look, like we maybe used to get 10% of our inquiries were people that were in the large group or in the hospital looking to leave.

Today, it's over 50% of our discovery calls. Oh, wow. Are people that are making $500, $700,000. I'm working for the large group in the hospital.

Meditation, Quantum Thinking, and Future Self

And I need to leave because I can't do it anymore. Yeah, right. Yeah, and I'm either gonna leave medicine and they're all late 40s. Yeah early 50s We have a couple that are like 65 that are like I need to leave not like I'm gonna leave It used to be all people like you that had an insurance-based practice transitioning now 50 the consult a Dominion days we call it that I had in the office today was I mean, just starting from square one, a thousand square feet, no list, let's go.

How do we do this? Right on. Man, burnout's real, man. It's real. The suicide rate's real. The divorce rate's real. I get it. 2017, I mean, I hit rock bottom.

I was so depressed. I was so miserable. I was so unhappy with the corporate medicine gig. Like, I mean, it was challenging. Like, it was really challenging.

I didn't know where to turn, you know? I mean, luckily I did some intense psychotherapy and found the right coaches to really help me hone in on what I wanted, right?

Because, I mean, like I said, I wasn't the guy who goes and hangs up a shingle. So that wasn't even my realm of possibility in 2017, 2018, 2019. Trying to make it work in the system.

Exactly. But the system is so messed up. Like everywhere I turn, the people who are in it, I'm just like, I talked to them. I found great people. They're like, we'd love to have you on board.

I'm like, awesome. We have similar personalities. We believe in to really taking care of people. These are good guys. And women too. But they were like, oh, we're going to be joining honor health, which is a big health care organization here.

And so I started interviewing with those organizations. I'm like, wait, this is look, this is just looks and smells like, yeah, just exactly what I'm trying to leave.

Yeah. I was like, this isn't going to work. I'm like, so what do I do? And yeah, then the right people kind of gave me help me find the confidence to just go do your own thing.

How did Okay, so it's 23 you're in you're in our program for four months or something like that Nikki's in the call, right? Yep. Yeah, and then you finally jump on You I remember you I use again I use your story a lot Matt you don't understand my patients are not gonna pay cash.

I've already tried They won't pay $500 for a PRP injection, right? What changed for you? Because it was a big I really was wondering whether or not you were gonna make it.

I know I know I was like You know, I okay what really changed I mean Nikki living with Nikki my wife because she saw the bigger picture She saw she saw where we are right now.

She saw that in 2023. Yeah, I didn't see that. All right, that's number one on a second. You've always been a Guy that understands the power of her thoughts sure like it won't we're gonna talk about like your meditation journey and stuff like that.

Yeah for sure but it's not like you weren't exposed to the power of your thoughts or Manifest concept and the concept of the quantum field and things like that right, but you were like Unbelievably blocked and it was it really rattled me because I'm like, I don't know ash really well But I can tell like he's a spiritual dude and not from the standpoint of hanging out in church and so right You know what I mean?

Like yeah, but so you had a massive block. How did you get through it a lot of work? So, you know and part of that was fear and You know? Talk about that.

What were you afraid of? You know, I think a lot of it goes back to us being conditioned that we're not worth it. You know? It's that deep. It's that deep.

They hammer you that bad. Oh, they hammer you that bad. It's like, no, your epidural should be 300 bucks. Your office visit should be 60 bucks. Like, that's what we're like, wait, now, was it charged 500 for an office visit?

I can't do that. No one's going to come to the door and I'm going to start. Yeah, exactly. I'm going to freak out. I got to make a living. I need these insurance.

So that was the thought process I was stuck in. That was a mental loop I was stuck in. It's like I need insurance to make a living. Someone I talked to recently, I'm trying to get them to join your mastermind, but he's like, I don't want to pay the money.

And he's like, he's in the seat. He's exactly who I was, man, in 2023. I told Nicky, I'm like, I won't say his name. Don't embarrass him. I'm kidding.

No, no, I don't. But dude, there's hope for you. Just like, join Mavericks. Join Mavericks. But you know, so you asked me about the breakthrough. So let me tell you about this.

It was you, you know, being in that group with Josh Hector, Ariana Demers, Deb Matthews, Amy Duffy. I mean those Tracy gap and like that was amazing like the golden age We've got a new general we've had like we have new generations.

Yeah all the time, but we're the OG man That was that was a pretty powerful group powerful group. Yeah. Yeah, it's like we're all still really tight. Oh, yeah, we are on check time.

Thank you ever. Yeah Mark Petropoli. Oh my god. It was a pretty great crew. Yeah, what a great group man and

Buford was a part of it for a little while.

That was a really cool group, but it was just being around all of us together and that mastermind mindset. We're sharing ideas as a collective. We're getting together and you were a great coach, a great leader, man.

That had a lot to do with it too. Making us realize that we're worth it. You said I mean you're the one who hammered in they undervalue you They you know, they're undermining your intelligence and all the hard work you put in you're worth more than that Yes, look at what you guys do.

Look what you're doing for people. It's like Like yeah, man. Yeah, no offense. I couldn't make it through med school if you gave me the answer to the test Yeah, I mean There's no there's no there's no way in a million years Yeah, I could even consider trying to take the entry exams like right right I have I am so impressed by your bike bike doctors intelligence and when I say you know doctors I mean all that like How what you have to learn and what you have to go through it's a language, you know, I tell people it's beyond a language There you probably I mean, there's you know, there's a lot of intuition that comes in this too Like especially when you're doing biologists because it's not a protocol like I do not believe in a protocol for for biologic therapy because it's jazz It's jazz.

It's all improvised. It's jazz. It's jazz. Exactly. Jazz has boundaries. Yeah. But what jazz is, because you haven't met my brother Dan, but he's a professional musician, right?

And he plays a lot of jazz. Oh yeah, I did meet him. He was here. That's right. That's right. That's right. You came to see Buenos Aires. Jazz has boundaries, and inside of it there's three to four dudes playing four different ways.

Yeah. but it all sounds the same. It sounds beautiful. Yeah, it's jazz. Exactly. It's the Grateful Dead music. Same thing. Exactly. It's exactly. It's the Grateful Dead.

Six people on stage, virtuosos at their instruments, and they're all creating their own thing together. It's so incredible. That's exactly what biologics is.

It's exactly what biologics is. Because listen, you know, I'll give people a pre procedure protocol, but I tailor it for them. I mean, your biology is different than Sally's biology, which is different than Mary's biology, which is different than Joe's biology, right?

And so the therapies can't be the exact same treatment for each individual person. So you got to take that into consideration when you're doing these.

all these studies that are being done level one studies this and that i'm like they're missing a key component of what biologic therapies are and that's personalization yes right yes great you have protocols standardization this is a different field of medicine this is and i think that everyone's like oh we have to have standardization with prp and this i'm like yeah but you also have You have to have individualization and personalization.

You have to have that. It's not standardization by itself. It's like it's not one size fits all. It's just not that way. I don't think medicine is that way.

Medicine is not that way. The law is. But marketing is not that way. Playing golf is not that way. Right. Right. But like you have to understand like there is a related to golf.

Right. Because as a former golfer. Yeah. Yeah. Like you can go the tour event is here in town and you can go to the driving range and you'll see the top 30 players in the world.

And they'll all have different swings. But their impact point is exactly the same. And the impact point for those that don't know is when the club hits the club head.

So this space, the foot and a half of that impact point is all pretty much the same to get the kind of result. But they all wind up there in different ways.

That to me is how I view functional, this is how I view medicine. We've tried to make medicine like you're baking a cake. And it's not that, because the problem is the ingredients to the human body are completely different.

Like, I just had my blood panel done, right? Like, Wil Haas is my doctor, you know Wil. And, you know, he was laughing, he goes, you just got bad genes on the lipid profile.

I don't drink, I don't eat fried food, like, I eat clean like you do, right? And my lipids and tris are slightly high. And he goes, you just got bad genes, man.

Like, that's just, but if you were just trying to fit me in a box, you'd be pumping me full of statins, killing my leg muscles. Right. You know? Exactly.

So, like, it is. It's jazz, man. It is, totally. And I think that's really hard for doctors because they want, we get doctors that come in, I want to know what the exact protocol is.

Okay. Go to IOF, get some training. Exactly. Let's learn the basic fundamentals and then let me teach you how to free yourself so that you can free your intelligence in this gift.

When that sperm crossed the egg barrier and you were created, you were created to be a healer. Okay? That's what the creator made you to be. What has happened is they've turned you into a drone.

Yeah. And let's make you a healer again. But to do that, let me get you some baseline. Let me free your confidence. And then let me show you how to play some jazz.

You know? Like, let's do this. And they look at me like I'm, what the hell? What the fuck are you talking about? It's okay. They'll get it eventually it takes about four months.

It does and I can see when the light goes on they go. Yeah. Oh Okay. Yeah, now I understand why it's a year-long program. I'm like, yeah. Yeah, that's that's because most people they stay with us Yeah, we did.

Yeah, we did two years. Yeah, and that's what we needed and it was perfect because You know what shifted for me was the kick in the ass you gave us in October, which was about Six months in or five months February to October almost seven months now seven months Yeah about seven months in the program because and that's not your fault That was me like my stubborn wall like I apologize to Nikki all the time I'm like I get it I now I get what you were trying to get me to do and look you think I haven't done with this before it's common man.

Oh, yeah Oh, yeah, you get the rare ones like Shakhtar that goes Let's do it. Shakhtar is an extraordinary human being. I love that guy so much. Same thing with Donnie.

Donnie's like, Matt's telling me to double my prices. I'm gonna go double my price. Like, he gets it, right? As he should. He's one of the world's experts in this stuff.

Like, yeah, I mean, you know, if you're gonna go see a world's expert. It took Roddy five months for him to really get it. Five to six months. It took Petra Polly Eight.

Yeah, eight to nine, but he listened to you man. I remember I remember when he when he sent me the text coming back from surgery He goes. Yeah. Oh my god.

I just spent nine hours in surgery and I'd have to do a week of this to make what I'm gonna make tomorrow. Yeah. Yeah Exactly. Yeah, actually man. It's a game changer and then Meditation was a big part of that.

Okay. Yeah, let's start that. Okay. Yeah So you've done a lot of work with dispenser. I have yeah, you know, I started I started meditating I started in high school.

I started dabbling in high school, dabbled in college, a little bit in med school, not too much during residency. And

then in 2016, Nikki and I went and learned Transcendental Meditation.

So we did TM. I did that pretty fairly regularly. Let me look here. I'm going to, excuse me for just one second. So I log all my sessions. Really? I do.

There's an app called the Insight Timer. And I just use it for, yeah, it's fantastic. It's got hundreds of thousands of guided meditations. It's got courses, all that kind of stuff.

It's free, which is amazing. I use it for a timer, but I'm on 1,092 days straight of not missing one day of meditation. 1,092 days straight. And how long are you doing these for and how many times a day?

Anywhere from a low of 20 minutes, up to 45 in the morning if I have time, and then at night it's about another 15 to 20 minutes. Alright, let's talk about this.

So this is an area that, like many people with meditation, I was probably first exposed to it in my 30s, right? Did a little bit of it. Didn't think I was very good at it, you know, because I'd get distracted.

My mind would be running. Didn't have apps back then either. Pop a CD in or something like that. And then off and on. So in the last. In the last, so somebody somehow some way a video about Dr.

Zeeland, the Russian physicist who talks about the quantum field and pendulums and all of that, I have no idea how this got in my box. It was one of those things like it got there and all of a sudden I started watching it and like 30 minutes later I'm like, oh, I finally get it.

So probably about four months now, consistently five to six days a week, the thing I've noticed is we look at business and I look at goal setting completely differently.

I don't look at 90-day projects. I don't look at quarterly sprints. I don't really worry about the revenue numbers. I'm tapping into the coherence of the quantum field.

Like I'm tapping into the feeling of my future self. Right? And it is a game changer. I want to hear about what you have been experiencing. Because what I'm experiencing is things out of the blue are showing up.

And I'm all in a serendipity, but it's coming at a completely different level. Because I'm surrendering to my future self. Exactly. I want to learn more, what's this been like for you?

What are the changes that you've seen in your life and your business? Let's dive into this, because this is something I think is I'm seriously contemplating creating meditation course and event and things like that for doctors.

Yes. It's on the list. And combine it with what you're doing with Mavericks. Yes. That could be incredibly powerful. I've done some teaching in the quantum field, which is really cool.

Yeah, we talked about Joe Dispenza. For those of you who don't know, he's a chiropractor who I think in the late 80s or sometime in the 80s, was running a triathlon got hit by a vehicle shattered his spine was told that he's never going to walk again he has to have this big spine surgery he's going to be fused from his neck to his pelvis and he still won't be able to walk even if he has a surgery and he said screw it i'm not going to do that so i'm going to know what i know as a chiropractor are my knowledge of anatomy He was into yoga at the time too, my knowledge of yoga.

And I'm going to tap into my innate healing intelligence to try to heal myself. Well, he did. He walked out of the hospital, I think six weeks later.

Biologics, Personalization, and Healing

Yeah. Yeah. And healed his spine. And he's like, made a commitment that if I can do this, I'm going to share this with the rest of the world. And he did it through meditation.

That's what he does now. He basically demystifies the mystic, the mysticism, right? And he backs it up with a crap ton of science. It's all science, yeah.

It's unbelievable, the science. He's doing incredible research. At his events, he has people who volunteer. They'll take blood before the event, after the event, see how things change, the blood markers change.

They'll analyze breast milk, saliva, EEG activity. Heart coherence like the energy in the room and everything shifts in seven days like it's tremendous He's like the blood chemistry changes so much at the end of seven days.

You're a different person Yeah, yeah, it's that powerful and it's just breath work and meditate. It's just sitting and connecting to yourself. Yeah, you know and You mentioned like when you were in your 30s your mind was racing in meditation.

That's just fine Right. I used to think that was the wrong way to do it. No, you just let it happen. Right. It happened to me all the time. I think today, during my meditation, what did I think?

I thought about the podcast. I'm like, I haven't seen Matt in so long. I'm really happy to see him. It's been a while and all these things are going through my head.

I was thinking, I only have four people on the schedule. How am I going to make a living? It's still there. It's still there. It's deep-seated, isn't it?

It just goes. But it just goes. It didn't affect my day. I didn't go into my day thinking, I only have four people. It was a thought that popped in my head while I was meditating.

But that's what meditation, I think, allows us to do. You can have those… those intrusive thoughts or those self-doubting, self-limiting thoughts, but you let them go.

And that's, I think that's what happens when you practice regularly. Like that's why I don't miss a day because I know it's the most valuable thing that I do.

Obviously there's a physical component, the exercise, lifting weights, that's a passion of mine too. But meditation like 1092 days straight, haven't missed one day.

What's different? What's different for you? Oh man, lots different. I mean, I'm a totally different person than I was even two years ago. Yeah, you're way calmer.

Way calmer for sure. You've lost a lot of weight. And happier too. Oh yeah, dude. How much have you lost in the last? Oh, I only lost like seven pounds.

Yeah, but it's redistributed. It's redistributed. Yeah, I've got more muscle mass now. Thank you, thank you. A lot of that was because I was in an insurance-based practice and I was like, I'm not living the life I want to live.

I'm not doing the things I want to do. Insurance, man, we're forced to do destructive procedures, right? The epidural steroids shots we do, the ablations we do, those are destructive procedures.

They're great at masking pain, and some people need those, and that's great, but it doesn't resonate with me, right? It's not what I feel, it's not who I am, it's like, I know better.

Like, there's a better option than what you're doing. Yeah, it's gonna cost money, but I tell people, look, if you want your insurance-based care, like, you don't need me.

There's a, literally, there's a hundred pain docs in this town who take insurance. They're in a dead cat and find one. Yeah, like, come to me when you want an alternative, right?

Meditation has helped me become at peace with that. So was that really hard? It was, for sure. Because your identity was locked up in high volume, because you all talk about high volume numbers and how many patients you see.

And I loved my patients. All the people who put their trust in me. I tell people, when you're doing spine shots, that's incredibly intimate. And the person on the table is putting their utmost trust in you that you're not going to fuck them up.

That was me exactly when I was awake exactly I know while you're awake exactly it's like I got this I know I'm good at what I do But I have to I always honor and respect the person on this table that chose me to be the guy to do it You know and so there's so much love there and so even when I was doing 50 shots like I love all my patients you know and Leaving that world was really hard you know because there was that letting go did you tap in you know?

Just depends on a lot of other people they talk about the outcome that you want. Yeah. Right. And then tapping into the feeling and the emotions. Exactly.

How has that been working on that every day? So when I meditate, I'm like tapping into the future self. Exactly. Yeah. So talk about that. Like, yeah, I look at like I tell people in the company, like our future self already has the answer.

Yeah. We don't have to find. Normally what happens is I'm here. I've got this problem in the present. I want to get to the future, and I'm trying to solve where I want to get to the future with today's skill set, which is impossible.

So what I've learned is, no, the future self can draw us to that. Now, as a doctor, doesn't that sound a little totally crazy, but at the same time, when you tell me that, I'm like, that's exactly what it is.

That is the key right there, is become your future self right now. That's the only way it's going to happen. Yeah, one of our favorite books, be your future self now.

Exactly. Right. What is, do you remember any of the science that Joe talks, Joe talks, Dr. Spencer talks about this with regard, because you were really impressed with how deep he went into the science.

Oh, yeah. I mean, it's fascinating. But to me, I don't really need that. You know? I mean, yeah. I mean, it's cool. Yeah. But I'm way beyond that. You know, I'm more about the feeling.

Yeah. Yeah. Like, I love the feeling. Like, being in that room for those seven days, man, I got deep. And like, I had breakthroughs. Like, okay, in that one week, I changed so much.

When I got home, Nikki didn't even believe it. Really yeah, she's like she's like no she like that's not who you are I'm like honey. I'm telling you like she didn't go with she was there Oh, she was there with me, but okay when we came back the conversations we were having like I'm not gonna get too personal, but we had some intense conversations, and I'm like, I'm telling you, this is how I feel.

And she was like, I don't believe it, I don't believe it. Because it was such, so the opposite of where I was before this week, you had changed. Had changed, transformed.

And then things started happening. Because I stayed with the meditations, I mean, 1,092 days, that was July of 24th. I'm just logging it. I think it's cool.

No, it's very cool. It's very impressive. I want to keep it going. But it also motivates me, right? And it's my commitment to myself. I'm not going to miss a day.

If I'm traveling, I find time to do it. If I'm traveling, I get up early. I'll find time throughout the day. Or when I get back to the room, I'll find time to do it.

It's 20 minutes. It's easy. I mean, I blow that on Instagram. Exactly. No kidding. No kidding. Yeah. It's way better than Instagram. It's way better than Instagram.

Yeah. I think the most fascinating thing for me in the whole process of meditation is, so I can't remember, it was over Christmas or something like that.

And there was some, Daya Training Center had some dispensate thing on sale and I bought it because I've been following Joe. And the first time you listen to his meditation, you're like, what the?

I know his voice. Yeah. Yeah, but I understand why now because like it changed It's a it's a different bucket for your brain your brain can't like put it into the other same bucket So ego that's getting in the way there.

That's your default mode network. That's Taking that signal envy and you don't want to listen to it. So I'm making fun of him I'm listening to him and I say he talks about this whole thing that 90% of our actions today were replayed or replaced from yesterday Yeah Yeah, okay that makes sense because I've done a lot of work in that of like all that and then he started sharing the science About how people's blood panels change.

Oh, yeah, and they're immune cells Yeah, they fight all of these things. Yeah, and I'm like, okay, this is got this has me intrigued and then I think for me What really hit it is I was doing a meditation and I was like fuck 30 minutes and And I start the meditation and all of a sudden he's like, and now come back.

And I'm like, there he goes. That was a myth. And Christine's like, how was the meditation? I go, nice. thought and felt it was like five minutes. And it's just amazing how things change in such a positive way.

When you can tap into that future self, you really, people have no idea how much they replay yesterday. Oh, yeah. Well, it's a familiar past. He talks about that all the time.

I know. Like we're stuck in the familiar past, and that's why we're stuck where we are, because we're reliving the past over and over and over again every day.

Yeah. I mean, I'm surrounded by that. I mean, we're all surrounded by a society. Well, I mean, there's a lot, actually. I have a lot of clients who've escaped that, and they're living in their future self in the present every single day.

And it's extraordinary. Yeah, it's inspirational. We're so stuck. I mean, we're so conditioned from our past. That's all we know. And it's comforting.

It's like it's safe. Yeah, it's like it's I liken it to why does the woman who was abused by her husband go back to him? Yeah, because it's familiar. It's familiar.

It's not necessarily it's safe, but it's safe. And at least we at least we know how bad it's going to be. Exactly. Right. Yeah. We don't know what's on the other side.

We could we could find somebody worse. So he can't be that maybe he's just not that bad. Right. Oh, he really does love me. Yeah, he just happens to break my nose every six weeks.

Yeah, and my jaw. Yeah, it's really, it is, we really don't understand, and this has helped me a lot with the doctors to help them understand the insurance relationship is an abusive relationship.

It is, for sure. Like in my book, I talk about this. When the book comes out, I'll bring it out. We're the modern spouses. I call it, it's the modern medical plantation.

You're the sharecropper. Yeah, right, right. And the insurance companies in the hospital system are the rich white plantation owners. And you think this is the year you're going to finally make money.

You're like, sorry, you still owe us money. You got to do it again next year. Yeah. It's interesting how we just get conditioned to think that, well, it's really not that bad.

Did you ever think that when you were in the insurance space that it was really just not that bad? Oh, yeah, for sure. For sure. I mean, I was in it. I was so excited in 2021 to get the insurance contracts.

I mean, literally, Cigna was giving me 74% of Medicare. I was like, yes, I got a Cigna contract. Healthcare gave me like 84% of Medicare. Yes. Like, no one gave me Medicare rates.

Like, Medicare was my best payer. Which, if anyone knows, the whole system of Medicare is designed for you to break even. It's not designed for you to be profitable.

That's not what Medicare is. It's designed for you to break even. It's a socialized system. Exactly. Yeah, that's worked well on the rest of the world.

Yeah. Right? Not. But these insurance companies are paying us, well, at least me, because I was a solo private practitioner. I didn't have the negotiating power that like a large Banner Health or Honor Health or these other paying groups that have like 12 offices, 15 doctors, they've got negotiation power.

So they're like, hey, look, we're taking care of this 100,000 people that are on your plan. We want a better rate or else they're going to have no place to go.

Right. And so they bump up the rates. They don't bump it up that much anymore. I have no idea. I'm so out of it. I don't give a shit. What has been happening?

I can't, we're not, let me rephrase this. What appears to be happening is the insurance companies have figured out that they actually still have all the power.

So with these large groups, what they're doing is they, let's say the medium-sized groups, not the large groups. The medium-sized groups and the smaller groups that come to negotiate, they'll be like, no, we're going to actually lower your rate.

because what they figured out is they can bankrupt them and then they buy them for pennies on the dollar. So the insurance companies are now going out and buying these insolvent groups.

So they now in some of the some of the situations like UnitedHealthcare owns 11 distribution, 11 different revenue points in the medical journey, 11. They own the pharmacy, they own the PBM, they own the physicians.

When Rockefeller and Standard Oil did this and they owned the refineries, the oil wells, the trains, the production house, all of it, when they did that it was called a monopoly and they broke it off.

Exactly. Right? Yeah. I mean they tried to do it to Microsoft. Yep. And that's exactly what has happened. 100%. It's not a monopoly because it's not won.

Right. Whatever that other phrases I felt sick that day in business school, but I mean, that's what they've done I mean, it's that's what I would do if I owned them.

It's just it's bad It's just I can't even it disgusts me on a regular basis. So I'm so liberating to be out of it, man Yeah, and yeah, I'm so grateful.

What was it like to get rid of your first? The first insurance provider. It was scary. It was really scary. I'm not gonna lie. You know, you helped us with that.

What we did is we looked at the lowest lying fruit. Like, we did a volume base. Like, okay, we have this insurance. How many people are we seeing for a quarter with this insurance?

Ten. Okay, well I can live without those ten people. So let's get rid of that insurance. So we did that. Then we went on to the next one. Okay, what's the next in line?

Well, you see about 50 people a quarter from this insurance. Okay, let's drop that. But what happened was the volume didn't change. More people showed up.

And remember I told you that? I know. And what did you think when I told you that your volume wouldn't change? Well, nature bores it back here. Yeah. Right.

So going back to the work at Dispenza. Right. Nature, it can't. Yeah. Everybody do this. Go home tonight. Take all your clothes in your closet and give them away.

I guarantee you, no matter how dead broke you are, you will have a full closet in six weeks. Exactly. I do it all the time. Right. I just got rid of a bunch of clothes.

I'm like, fuck. And what I yesterday was at Lululemon almost bought stuff. I'm like what am I doing? Oh, yeah, I don't need any more gray pants Yeah, yeah, it's okay.

So you get in the knee. Yeah, I increased the volume stayed the same right so October 20 October 23 is when you scared the shit out of me and Really opened my eyes and made me see how bad it really was if I didn't change things Like we're gonna lose everything like making it when we're burning through our savings and so literally six months later We started we see well we started weaning off the shirts before that but six months later and Our better paying insurance patients were flooding us.

So we actually had revenue and I can start paying the loans back. So we met with the bank. We said, hey, listen, this is our situation. We're going to turn it around.

Just be cool. They jacked up our interest rates, which sucks. Always. I know. But they were cool. They give us six months of deferment, though. It was interest only payments, which we could do but then six months later was like March March at 24 was when oh my gosh, I remember I oh you shared the numbers Yeah, and I use it.

I've done in the presentation. Yeah, exactly. Yeah, you went from like 20 to 40 to 80 something like that Yeah, exactly. It's a mat. It's happening. Yep.

It's happening always does yeah, like the cash pay is increasing and The insurance patients are starting to drop off, but the volume is still the same.

Mm-hmm. And so that went on through We should we wean off all insurance July 1st 2025. So from that include Medicare? No, except for Medicare. I don't consider Medicare insurance, but all private insurance.

Right. And then from July to December last year, what happened was Medicare was 70 percent of my my patient volume. It was less than 10 to 15 percent of my revenue.

Yeah. Yeah. But those Medicare patients were buying your cash-based services. A lot of them are. A lot of them. Yeah. And I was like, this is… Medicare is a great…

It's a great lead-gen. It is, for sure. For sure, yeah. A lot of my high-net-worth people saw me through their Medicare for their consults. Not that they needed to, because now they're still seeing me and then they're not going through Medicare.

But 70% of my volume was Medicare, but it was less than 10 to 15% of my revenue, of my insurance revenue. That's amazing. It's amazing, dude. It's freaking 80-20 at its finest, isn't it?

It is, exactly. Yeah, which you drilled into our heads. So 30% of your clients were generating… 30% of your patients were generating…

Insurance Burnout and the Shift to Freedom

90% of our revenue exactly yeah as it should be by the way oh yeah so by like October I was like I can't wait to get rid of Medicare because I want to have a better schedule I'm gonna have time well so we drop Medicare January 1st And man, I saw a lot of people in January.

We had a great month, didn't you? It was great. Best month ever. Better than any insurance month. Better than any insurance and cash pay month combined.

Yeah, best ever. Like, 10x. That's why I texted you. And it's continuing. That's why I texted you. 10x. I was like, Nicky, you gotta text Matt. And I was like, 10x.

See, and that's, you know, it's really fascinating to me because, you know, nature never changes. Yeah. Nature is the same because it's based on science and creation, right?

Like whether you believe in creation or not, right? But like, there's a reason why. there's a reason why 20% of the people control 80% of the wealth. For sure.

And 10% of the people control 90% of the wealth. Because it's scientific. Because 20% of the sunflower head has 80% of the seeds. Like you can go through nature over and over and over again.

And what we try to do as humans is we try to make everything equal. It's impossible. Because when we do that, You know, like 20% of the dead shows have 80% of the positive reviews.

Whatever, right? Like, you can keep going on and on and on. And when I can get someone like you that gets it, when you and Nicky got it, you know what?

You took it as long as anybody else, right? When people get it, their business just goes, bam, like that. Their stress goes down and it's just, it's the most satisfying thing in the world for me.

I imagine it's kind of like when you feel, when you have a really hard case and somebody can now be pain free in their back. It's incredible. Like today I had only four people, but there were follow ups and you know, one guy is six weeks out of his Procedure we did in December and he's like, I'm 80% better.

It's only been six weeks He did my back two years ago. It is I had Ryan Yeah, yeah doing weird orthostoma. My left side gets tight. I'm like, can you double-check and make sure that I got it?

No, you're just you got a stretch more. It's tight Can you and I know it's just all I know it's just ultrasound. Yeah, can you check my right side? He goes you look great Yeah, because that's where that facet was remember that what was the deal everybody asks?

So I got to get it on record like would you remember? Yeah, you got that golfers back you got that rotation and so you're you have the sec joints in the spine That's where the vertebrae articulate with each other.

Okay, and when you rotate and golf you stress out L four or five that's where the most common rotation point is in golfers and You with your swing you're loading that right L four or five So that right L four or five because you got the MRI right before we did your procedure and that right L four or five facet was lit up Yeah Yeah, because I remember I did.

So I do a comprehensive spine treatment because I don't believe in treating just one spot. That's a stupid insurance based modality. It's a mentality which misses the whole functional spinal unit, ligaments, muscles, the levels above levels below, joints, capsules, all of it, right?

The fascia. But I did all that stuff. But when I hit that one spot and I started injecting, you're like, oh, God, that's it. That's it right there. That's the spot.

That's the spot. And you had me stop. I was like, you just tell me when. Like, OK, go, because you were not sedated for this. No, I was everybody. This was a Sunday, right?

Sunday night. It was a Sunday night. I'm not sedated. So it probably took twice as long as it normally would. OK. Yeah. It was a lot of fun. It was really cool, but what was amazing is when I did that last shot in that joint And I was injecting the PRP into it you were like I felt the pain leave my body So you injected the dye yeah, I think yeah, and I felt the dye cool and go around it Yeah, and then you okay now I'm gonna push the PRP and you push the PRP and what happened is it went?

It was like the PRP went to the bottom Yeah, and as in it pulled itself up, and I felt the pain leaving my hip. It's never been my no It's never been wait that day Which is insane.

I used to not be able to hit balls back to back days. Yeah. I used not to be able to play two, three days in a row. I mean, I took a trip in a year and a half, but I mean, it was in July.

I played like four days in a row. I still have the video you sent me. So you left on Monday morning, you sent me the video on Tuesday, and you're like, dude, I just got to tell you this.

Like, I sat on that plane, my back did not hurt at all. Not at all. And you're like, normally that six-hour flight, I'm up and down, switching positions, walking up and down the aisles.

So great. Yeah. I felt great. That felt normal. Great, but I'm glad how important is it? Do you are you doing anything with regards to like HRT and? Personally because a lot of my referring providers are concierge medical docs.

We have functional medicine training You think it's important to get the right to have better outcomes like if somebody's on HRT and they've got their gut health Are we getting better?

Absolutely stuff the healthier you are metabolically Yeah, the healthier your procedure is going to be the better the outcome is going to be you know How important is it, you think, for somebody to be doing meditation on a regular basis before they go?

Would that improve the meditation? Or whatever works for them? Prayer? You know, whatever. Breath work? Whatever works for you. But you think that would improve it metabolically?

Absolutely. Yeah. Absolutely. I mean, Joe Dispense has got data that shows that, right? We changed our blood chemistry. I'm sure it's doing something to our stem cells, our growth factors.

I'm sure all of that's getting activated on some level. But I feel like it could be prayer. It could be what we call meditation. It could be breath work.

It's all the same. It's all that same bucket, right? Yeah. Call it what you want. Do what works for you. But as long as you're taking those moments of stillness to connect with yourself, you know, or connect with a higher power, whatever that is, it's all the same.

Yeah, but I think there's shifts that happen there. I mean, we know from the TM studies that people who do TM, Transcendental Meditation, yeah, they have lower blood pressure, lower risks of heart disease.

I mean, that's well documented. I mean, that's scientific. That's been out for decades, even before Dispenza. So now, Dispenza is taking it to the next level.

Well, he's even showing in his studies that it is reducing cellular age. Yeah, right. Exactly. The telomeres and all of that. Right, which is remarkable.

I mean, we can do that all with our minds. It's fascinating how little we know about the mind, right? Yeah, I mean cuz what we're taught is what we I mean medical is their brain and we don't learn about thoughts, right?

It's a field of psychology. They tell you to focus on your brain and they cut out your heart. Yeah When I can get a doctor's heart reconnected, yeah, it's game over like literally like we do man on that now Yeah, when I can get their heart and head coherence together I know like, you know Even when I was back with Bali, I was giving my cell phone out to my clients back then, my patients back then.

I remember my circle of friends here. A lot of them are doctors. They're like, you're too exposed, man. You're too close to your patients. Like these guys have no connection to them.

No, it isn't that what you're supposed to that's exactly what I thought I'm like what I want is a picture of them and like They would never understand like what I told you about like these intimate spine procedures, right?

And how much trust that people are putting into us, you know, it's like I honor and I respect that plus if you want to get deep this Energy and all that kind of stuff and I'm tapping into that.

That's a sacred space. Absolutely talk about that like, you know Well, so because I think I find it fascinating and I mean like, you know Go as far as you want if you don't know you're not to get too woo, but you know If you are if you come from that school of thought where we have this Kundalini energy, which is that it's like the energy of our chakra systems, right?

so we have seven chakras and they all have the center where there's motion happening, right? There's energy. You can think of it as a cerebrospinal fluid.

The flow of the CSF. I'm a DO. I train in osteopathic medicine. I spend extensive time training with two of the masters in craniosacral therapy and tapping into it, being able to feel it, right?

And when you connect with it and you can manipulate it, healing can happen. Like we saw remarkable things just with craniosacral therapy. Maybe it's just a parasympathetic nervous system reset.

Whatever it is, it's pretty powerful. But that Kundalini energy flows through our spinal canal. And when we're putting needles in there, we're tapping into that energy.

That's another reason why I want to put steroids in there. Because it's so toxic. Because it's a toxic and you're blocking the energy flow. Exactly, you're gonna block the energy flow.

Like now when I do these biologists, I'm putting people's own stem cells in there, I'm putting their own blood growth factors, their own anti-inflammatory proteins.

It's like I'm feeding that energy, right? Absolutely. We're creating space, we're creating that flow back, which is so incredibly important for healing, right?

Yeah. That's what's going on now. But anyway, yeah. I love that. Look, I think it's, you know, we know, As much as we know about the body, we know so little about the body hundred percent.

I mean, yeah Remember when we told them we were told margin was good for us. I mean like I loved margin back in the day It's like I'm not gonna die. Yes, you already got Alzheimer's you got plastic in your body American cheese and margin.

Oh my god Those things like that wasn't bad for you at all Jesus You know, but we know so little about the body and that's one of the things that's happened for me One working with doctors for the last 12 years.

I used to get queasy like driving by a Walgreens, right? Now I'm like, oh you're gonna do surgery. Can I can I sit in can I watch right? But then the other thing is I'm realizing we know so little about the energy flow of the body.

We know so little about how what you were just saying, like you're injecting steroids into the spinal column. That's disrupting the energetic flow. When we use our own biologics, it's enhancing it.

It's fascinating. It's a whole mindset shift, right? I mean, I've always thought about that, but it really, I mean, at least entering that space, but I didn't really think about how toxic these shots were, because I look at it like a bigger picture, like, hey, I'm giving, I'm helping this person get back to who they are, right?

Because they've been in so much pain that they can't play golf, they can't play with their grandkids, they can't go on a vacation, you know, so. Even if I do this shot, they get back to who they are for the next three months, right?

And so there's definitely a reward in that and it's felt fulfilling. But, you know, after 10 years of that, I was like, shit, people, they're not getting any better.

They're not getting any better. No, they're getting worse. Yeah, 10 years later, it's like, oh crap. Yeah, like, yeah. I mean, especially with ablations, like it's a great tool that we burn some nerves in the back and get rid of back pain for six months up to two years.

But I didn't learn until 2017 because they didn't teach us at Cleveland Clinic that the medial branch nerve innervates the multifidi muscle, which is a main stabilizing muscle of the spine.

And if you ablate that nerve, that muscle atrophy. Oh, Jesus. Because that's not it doesn't matter. We're pain management. Well, that's a side effect, but we're managing the pain.

So nice job. You know, and in 2017, these regenerative medicine people were putting up MRI studies and showing us, oh, this is a spine two years after an ablation.

And I'm like, oh, that's not good. And I learned to read spines in a completely different way in 2017. So I look at the multifidi muscle, and now I understand when people have gone through epidurals, ablations, all kinds of treatments, physical therapy, everything, chiropractic, And they're just not getting any better.

Yeah. And no one can figure it out. You look at the MRI, you'll see that muscle atrophy, unless because you have no support in the spine. And the problem with that is they get sent to a surgeon who fuses the spine.

But motion wasn't the issue. It's the lack of the muscle. Exactly. And then you just create dysfunction above and below the fusion. Yeah. And that's our system.

Where? Two part question.

Grateful Dead, Legacy, and Closing Thoughts

Is the American health care system fixable? And if so, where's it going? What do you think is going to happen? Well, I grapple with this because I don't think the system is broken per se.

I see flaws in it, but it's working exactly like it's meant to work. Well, no, it is. You're right. It's a well-oiled machine. It's working exactly as insurance companies are making billions and billions of record profits.

I'm talking about the outcomes for the patient. Like, is it? I think people gotta go back to the basics. Clean up your food. Start with food as foundation.

Eat nutrient-dense food. Think about what you're putting in your mouth. That's where it starts. You gotta move your body. Being sedentary is just as bad as smoking two packs a day.

You gotta move. What if I smoke a pack and a half a day? Is that okay? No, I'm just kidding. But you know what I mean. I think we have to start there and not become reliant upon the medical system.

I think that should be the focus and that should be our goal. And then the things that I'm doing should be like luxury items for people. Would you go to medical school again today?

Yeah, man, I would. Would you still do it? I would, for sure. Yeah. For sure, because I love, I mean, now that I am where I am today, 100%. Like, yeah, in 2017. What would you tell someone, if you were, if you were your younger, talking to your younger self, 22 years old.

Oh, yeah. What would you tell them to do? I can tell you exactly, because I have this great student, Sebastian. Hey, dude. He's, I think he's a second year med student now, but he came to me his senior year of college at ASU and he was really interested in going to medical school.

So he shadowed me off and on for a year and saw everything I was doing with the biologics and all that stuff, how I interacted with my clients. And when he finished, I was his thesis director for his senior thesis.

He graduated with honors, got into med school. And when he got into med school, he's like, Dr. Goyle, he's like, listen, man, he's like, you taught me the three most important things and foundational for me going into med school.

Number one, the body can heal itself. So support it. Yep. Number two, Patients come first always. Treat them with dignity and respect. And it's okay to be close to them.

It's okay to connect. I'm like, yeah. Number three, he's like, fuck insurance. My mission has been accomplished. That was like, okay, that's what I would have told my younger self back when 23 years old when I started medical school.

That was the advice. I gave it to him. So thinking of me as my younger self, I wish someone would have told me that. Well, my goal is to just, I want a medical school where I can teach a semester of business.

That's my goal. I figure if I can get one, then I can get two semesters, and then we can put it, if we can get two classes and two semesters on business and cash-based services, I believe that in the next 40 years, we can change healthcare big time in America.

You know who I think, so this just made me think about, One of the Walton children, the daughter. The daughter, she started the medical school. She started the medical school in the University of Arkansas.

It's incredible, like her philosophy, what she's doing with it, it's all nutrition-based, it's heart-centered. I mean, she's radically changing this group of doctors.

I love that. If you can connect with her and incorporate the business side of it. And it's all free, they're paying for it, like they don't pay. Exactly, it's scholarship only.

Yeah, it's in Oklahoma or something? No, they're in Arkansas. In Arkansas, yeah. It's in the University of Arkansas. Oh, cool. Bloomberg, Michael Bloomberg, who was the mayor of New York, he's now set it up through because he's worth $50 billion, right?

And at Johns Hopkins, you no longer have to pay for medical school. Oh, I didn't know that. Yeah. Yeah. Yeah. Like he's got it set and you think he's looking at because when you come out with that much of debt.

Yeah, you're enslaved to the system. Yeah, that's ridiculous. Go ahead. Yeah, I was gonna say that might be a good person for you to reach out to you Okay, I'll put in a yeah.

Yeah. So here's the ultimate question. I'm gonna ask you before we end Yeah, what's gonna happen with the Grateful Dead? Oh Dude, okay. Are they I mean, okay, so they had dead in company backstory.

My first dead show was Deer Creek 1990 and I mean, I was hooked. I was like, these guys have something truly special going on, you know? And I was a musician at the time.

I started playing guitar when I was 13, so in 1987. And I was getting really good. I was playing all the time. Like, that's what I did. I quit wrestling.

I quit sports to really play guitar. It's easier to pick up chicks. It's way easier to pick up chicks, for sure. For sure. Although being a stud wrestler was pretty…

Not too bad. It wasn't too bad either, yeah. The chicks are easier from the head. I wasn't really a chick magnet back then, though, dude. But music was everything to me, and I didn't like the Grateful Dead until I went to the show.

Yeah, that's usually how it goes. Because I had no idea, like, what they do on stage and how they interact with the crowd, that's magic. Like, no one is doing that on that level.

Like, they literally feed off the crowd. Like, they'll play a song, oh shit, that was a train wreck, let's go this way. Because they had no set lists, they would just get up there, you know, five minutes you're just noodling around trying to figure out what they're going to play next and they just go into a song and see what happens.

And that's kind of how they set it up. And it was such a unique experience. I was like, there's something about this that I'm really into. Yeah. And so I probably saw Grateful Dead with Jerry Garcia.

How many times? Like 20, 20 times. Yeah. I didn't travel all over the country. I wasn't doing tours or anything like that, but I go to like two or three night runs, you know, a few times a year.

So between 90, 95, something about 20 times. And then Jerry passed away. And then Bob Weir, who's the other main member of the Dead. I mean, they're all main members, but he was the other lead singer, songwriter.

I saw him and his variations of Dead in Company and all that stuff until he passed away just last month, at least 200 or 300 times. Like, no joke. I saw them a lot.

You saw them at the Sphere a lot, didn't you? I saw 24 Dead and Company shows at the Sphere. Yeah. I mean, that venue is just a cool venue to begin with.

You get two shows that tell people you're paying a ticket. Yeah, the tickets are kind of inflated, but you have music and then you have this thing. It's amazing.

It's amazing. It's freaking amazing. There's nothing like it. It's so good. It's so cool. And with the Dead shows, the thing about the Dead and why you could go see them 24 times is it's a different show every night.

The energy is different, the feel is different. I had a buddy of mine who's not a Deadhead who went with his wife, who's a really good friend of mine, and he was like, dude, I had no idea the Dead were like this.

He's like, I thought they were funny hippie music. He's like, they killed it. I saw him in Madison Square Garden like three times. Oh, right on. It was the night with Jerry.

Yeah, right on. Yeah. But what's going to happen to them? You know, so with Bob, we're passing away. The storytellers are dead. He's a storyteller. He was the last storyteller.

Phil Lesh passed away a year before. He was a bass player. He was the other storyteller because he sang a few songs. But now they're gone. Now there's just two drummers.

You know, so what do you do with that? I don't know. I mean, Bob, we're envisioned this music lasting 300 years. And, you know, there was an interview with him where he had an out of body experience at one of the big stadium shows who baseball field shows he was doing where He's like, I was playing, we were in a jam, and he's like, all of a sudden, I was 10 feet behind the stage.

And he's like, I was looking. He's like, there was a guy standing there who was in my place, but he's like, it wasn't

me. John Mayer was over here, gray hair.

Luteal, the bass player, was over here. He looked pretty old. He's like, and there was two different drummers there, young kids. He's like, that's my vision for the Dead and Company.

Just to go on, new people, just keep the music alive. When they go back to the sphere, we're gonna go? Oh yeah, definitely. You'll know before I do. Just count me in, brother.

Okay, you got it, you got it. We'll leave the wives at home. Right on. Nikki won't go. I don't think Christine will go either. It'll just be you and I.

Right on. I can't thank you enough for your friendship. Yeah, likewise. Seriously, I just love you and Nikki, your wife to death. You guys have really helped me and we wouldn't be where we are without you.

Oh, feelings mutual, man. For your mentorship, your friendship, your brotherhood, all of it, man. Thanks, man. And thanks for fixing my back. Oh yeah, right.

Anytime, man. Anytime. I opened its other mouth, but it was not for a long time. Yeah, but it is preventive too. Well, even if it doesn't come back, you know, the nice thing about these biologics is they prevent the breakdown of your tissue.

They keep the environment of the spine healthy. Yeah. Yeah. All right. So if somebody's listening, they want to get treated. What's the what's the name of your practice?

Integrated Spine Pain and Wellness in Scottsdale, Arizona. It's ispwscottsdale.com. Our phone number is 480-660-8823 and you can reach us online. Oh, yeah, I said that ispwscottsdale.com.

Yeah, and we're off Scottsdale and Shay. Yeah. Yeah. Thanks for coming in, Ash. I appreciate it. Love you very much, brother. You got it, bro. Awesome.

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