

Morphose_final

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SPEAKERS

Joe Johnson, Justin Angle, John Fiore, Michael Gardner, Maureen Dowd



John Fiore 00:02

We're trying to get people to, to sort of embrace and become an active part of their rehabilitation. And to do that, you kind of do the work. And if we can help them do the work 70% of the time instead of 50% of time or 80% of time, then that would be a huge breakthrough in the industry.



Justin Angle 00:20

This is a new angle, and I'm your host, Justin Angle, marketing professor at the University of Montana College of Business. This podcast is my chance to speak with cool people doing awesome things in and around the great state of Montana. We are proudly underwritten by first security bank and Blackfoot. Hey folks, welcome back. And thanks for tuning in. I love the story you're about to hear. John Fiore is one of the first people I met when I moved here. He's an amazing person and such an important member of the Missoula community. His business, Sapphire physical therapy, has helped many of us overcome injury, launched many of the great pts in this town, and sponsored many of the awesome events that bring us together. Sapphire was also one of the earliest supporters of this podcast, and for that we are eternally grateful. About five years ago, john teamed up with serial entrepreneur Joe Jensen, and then later Michael Gardner, to create more focused exercise systems. Their objective was to improve the way physical therapy is delivered, increased patient compliance, and improve outcomes. It's a classic story of a market ripe for disruption. And I'm excited for you to learn all about it right now.



Justin Angle 01:38

Okay, so I'm here today with John Fiore. Joe Johnson, Michael Gardner, the men behind Morphos. Fellas, thanks for coming on the podcast. Glad to have you here today. Yeah, thanks for the invitation, Justin. Thank you very much. So John, we go, we go back a number of years. I mean, you are one of the first people I met when I moved to Missoula, just met through the trail community, but also you're so highly regarded as an endurance athlete in this community. But a supporter of so many of the things happening in this town, a longtime supporter of University of Montana, physical therapy programs and your business, Sapphire, physical therapy is just sort of a cornerstone of this community. Before we get into the sort of the business that you guys are in, I think it's important to set the stage with understanding the problem. Because that that origin story, you know, how Joe came in as a patient, and then sort of was befuddled with what he left with for these exercises. Yeah, tell us about kind of the problem of delivering, you can deliver physical therapy in clinic, but beyond the clinic, kind of what's the problem with how it's delivered.



John Fiore 02:47

So yeah, in physical therapy, modern day, we see new patients a lot less frequently than we did when I started working as a physical therapist in 1993. So now we see somebody once a week, maybe every couple weeks, after a surgery, maybe twice a week, whereas in the 90s, we'd see people three to five times a week. So the frequency that we get to interact with patients is limited. And therefore we were asking our patients to do more on their own. And to do that, effectively, they have to understand the exercises that we're sending home with them. So that's the problem. And the frustration as a physical therapist and frustration we hear from our patients as well.



Justin Angle 03:28

And it would seem like when you say that they have to do stuff on their own. I mean, my experience of physical therapy has been you go and you learn all these, these sort of specialized exercises, they feel really good. You feel like you're making progress. And then you go home, and you got this piece of paper with kind of stick figures on it. And it's like, what do I do with this? By the time I have my next appointment, I feel like I've sort of lost the plot of how to do these exercises, that tell us about like, how that system came to be and why it was it's sort of baffling it kind of still exists.



John Fiore 04:03

It is a pretty archaic system that we're still using in physical therapy. When I started

working at first, St. Pat's in the hospital, you know, we didn't everything's in inpatient in person, you don't send people home with exercises. But then, when I started working in outpatient, we had, you know, we would draw stick figures literally, or we have these flashcards that we put on the photocopy machine and organize them in an order and then then use the Xerox machine and copy them in hand a piece of paper, a two dimensional picture to someone that's like the best technology we have. And even even Intel until today, the best technology we have is basically two dimensional photos or a two dimensional video that you can create for a patient, which makes it very hard to understand a three dimensional movement pattern and some of these movements are as you know, pretty complex.

J

Justin Angle 04:54

Indeed. And Joe, you're you sort of experienced that complexity. I think it was a shoulder injury. You sort of intersected with John, on trying to get some some help and realizing that, wow, this is sort of a weird system.

J

Joe Johnson 05:08

Yeah, actually, I had a fusion in my neck. And so I went back into him as much for strength and regaining balance, as you know, trying to repair any systemic damage. But it was, it was, it was pretty comical, you the exercise we always refer to, from that time was, it was a, it was a lateral hop. And so the the exercise was you're supposed to crouch, you know, on one side of the, and then jump laterally, land in a crouch on the other side. And the pictures that were, you know, john was able to provide was just a picture of him crouching to the beginning and a picture of him crouching at the end. So the pictures actually weren't even remotely helpful. It was it was all about the text. And if you didn't remember, you know, exactly what was going on, or the text was confusing, there was really no way to do anything. And so it, it just really doesn't, doesn't provide the help that you would hope you would get, you know, going to someone as knowledgeable as john, they just can't send that knowledge home, in a two dimensional picture with a little bit of a write up.

J

Justin Angle 06:26

And so, you know, as you lay that out, there's, I hear a few different problems. One, you know, John talked about contact hours just in decline having to be more reliant on patients doing their homework in order to get results to sort of understanding what the patients are up to during that time. And you can only rely on self report to talk about how the concept for morphos came to be like, what was the initial idea? And yeah, what do

you what are you trying to create deliver a better experience and better outcomes for your patients?



John Fiore 07:01

Well, in the physical therapy, world value is a big hot topic right now, knowing that healthcare is very expensive, lots of out of pocket dollars, deductibles, and co payments. So so my thought was, we can do better, we need to bring the technology of our home exercise programs up to the technology of our education or healthcare system or testing. And, and, and honestly, the cost of physical therapy, I felt like we were doing our patients a disservice, handing them or emailing them two dimensional instructions and, and letting them loose. They'd come back a week later, two weeks later, and, you know, how's it going? Well, I didn't get the exercises, you know, because it'll go to a junk mail folder, or they opened it up and weren't quite sure what to do. So they decided to wait until they saw me again. So So explaining my frustration to Joe and then hearing him constructively criticize the exercises I sent him. And in one of my kind of, you know, passionate tirades, I said, This is so frustrating, you know, I need to create something better. And I thought, initially, video would be the way to go. And Joad kind of said, let's do it. I'm up for a challenge. And maybe it's a place in our lives where, you know, life is rolling along. We both own small businesses, were busy but but creating something new, or the challenge of addressing a problem with a solution just appeal to both of us.



Justin Angle 08:29

Indeed, that's probably a good opportunity for Michael to kind of be brought into the conversation. Michael is Chief Business Officer, I mean, you got to be kind of looking at the market and have an understanding of how big an opportunity is, how big the opportunity space is here. I mean, when you heard about this idea, what made you kind of want to get involved?



Michael Gardner 08:50

Yeah, for sure. So, you know, Joe and I had known each other professionally for several years. And it was the beginning of 2019, that he approached me after they had gone through a few different iterations of morphos. And he said, Hey, we're starting from scratch. And we'd like somebody to be involved that can really guide us through the process, somebody that can handle the business end of things and can handle getting your skin getting us in the market, going in new markets, maybe some adjacent markets, that sort of thing. And so it wasn't really until I sat down and started working on pro formas that it really fully clicked for me. How much of an opportunity this was not just

from a business perspective, but from a Duke, like a do gooder perspective, right? Like I started to understand the problem more and more as I had, as I sat through conversations with Joe and John, that just what was you know, the the products in the marketplace that existed, were just not cutting it. And so when I sat down to do the performance, you know, I did more market research, I realized how many potential customers are out there. I realized how easy it was to actually identify those customers like the our customer base isn't all of America or the entire world, or just people that like to run, you know, they're their occupational, it's an occupational demographic. And the space, the physical therapy industry is booming, because boomers are aging, and they need more help. They're, you know, they're, they're having more surgeries or having more, you know, hip replacements, knee replacements, and that sort of thing. And so the physical therapy space is, is growing at a rate five times faster than the average industry in in the United States. So kind of realizing that, number one, it was gonna be really easy to find these people find, find our customers and number two, there's a, they're tremendously underserved. So as time went on, I started realizing a lot, it became a lot more brighter to me that this was a much needed thing. And something that could be really huge with, you know, even just by being a small company, we can make a tremendous effect.

J

Justin Angle 10:58

And so, you know, John, let's talk about the technology piece here. I mean, you're trying to communicate something really complicated and complex. And there's the three dimensional movement. In trying to capture that on videos inadequate, you guys have gone to kind of a unique form of animation to pull this off. Like, let's talk about the technology you're using.

J

John Fiore 11:20

Yeah, initially, video, as I said, was was kind of the area we thought we'd we create this space in. And when we looked at the file size for creating, you know, 800 videos to put in a platform, it became obvious that that just wasn't going to work, just the amount of space for storage, it would take on a device. And and then and then just, you know, thought, let's do something, let's be innovative, let's look at the future and thought of motion capture, which is a medium that's used for creating animations made famous by the gaming industry. So motion capture is what we did it first. And we purchased kind of a low budget, motion capture system and tried to record some exercises on our own, which was a big learning process, and then ultimately, went to a company mocap now in Seattle, and we went there in the summer of 2019, and recorded 800 plus animations in their studio, so where I'd put a suit on, and I think there were 16 or 32 cameras in this in the studio. And we went through each movement, starting with a T pose and doing the exercise and recorded

all these and then then the work actually just began because then the editing process. It's pretty exhaustive. But the end product is a 3d animated illustration of all the exercises that you can imagine a physical therapist would need it at his or her disposal. And it's a new technology that to our knowledge has never been used in healthcare. So it's pretty exciting. And we learned a lot and broke a lot of trail on the way.

J Justin Angle 13:01

So when you say 3d, I mean, it's still delivered on a screen, but can so how does the patient sort of capitalize on that three dimensional aspect?

J John Fiore 13:13

Yeah, that's a great question. Because we still we can't look inside it. What we have, or we have controls that the user whether it's the physical therapy, you know, selecting the exercise, or the patient at home, using their their phone and their computer, we have navigation tools on the screen where you can circle around the exercise, figure and look at any side top or bottom, you can zoom it in, zoom it out. And just really get a clear a clear idea of what you're supposed to do. If you want to look at what the foot and the ankle are doing in a squat, you can zoom right in on the foot and ankle. And these are very precise movements with motion capture. And that's that's the beauty of it is to be able to really kind of hone in on the question that the patient might have, you know, based on forum position, the speed, they can see it all, indeed.

J Justin Angle 14:07

And so Joe, as john is there in the studio with the suit on and I assume it's one of those suits with like all the little fuzzy balls all over it. Joe, how are you kind of thinking about the challenges of bringing this technology to life in a way that is sort of scalable and usable for the customer?

J Joe Johnson 14:28

So the watching john go through it. I think it's first worth mentioning that we were warned ahead of time that we should bring several models because doing it for even one day straight, typically was more exhausting than anybody was willing to do. And john did it for two and a half days without



Justin Angle 14:50

Knowing john that's not all that surprising.



Joe Johnson 14:52

No, No, it didn't. It didn't slow him down at all. I think he was happy for the workout. And you know, he he finished his hard day every day with a big run through the city. And of course, it needs to do with the same. So it really obviously, they didn't know who they were dealing with. The real problem with getting all these animations, once they're, you know, recorded correctly, and we're able to broadcast them is it really became a logistical feat. You know, as john said, we had about 100 of these animations. And each one is about 15 seconds long. And that's somewhere around three a little over three hours, which, you know, we were, we were working with people that are in the gaming industry and making movies and that sort of stuff, the mocap, now that john mentioned that we went to in Seattle, they had worked on Happy Feet, which is the animated penguin movie and King Kong. So they were used to working on things on a large scale. And giant cranium whom we used to put the, you actually it's a multi step process, and giant cranium did the final workings to put them on to the, into the application. Those guys have worked on giant, large scale video games. And both of them made the comment that this was the biggest thing they'd ever worked on, it turns out that 115 second animation is much more of a logistic challenge on there, and then just one three hour movie, or video game. So going through and meticulously recording all of them was super important, but also just managing the whole thing and organizing it in such a way that not only could the PT's reach in and grab these pieces, and put them into the application, obviously all automated within the application, but the patient is able to pull them up and just seamlessly move through each one of them. So you know, in addition to getting them in there and getting them put together, right, we also had to just figure out how to how to manage the process. You know, as john mentioned, editing 800 of these things was no joke, and it took it took the better part of a year.



Justin Angle 17:10

Yeah, that kind of you're laying out there really interesting dynamic, you've got to design this thing. So it's usable for you know, a physical therapist to kind of curate this set of exercises and activities you want a patient to go through, but you also have to design the patient interface. So the patient can access it. And Michael, that kind of brings brings up a question to me is like, who's the actual customer here? Like, how do you how do you guys conceptualize the customer?

M

Michael Gardner 17:39

Well, you know, the, we consider ourselves business to business. So the person that's paying is a physical therapist, and we, we anticipate that they will provide the service at no charge to their patients, because they can onboard as many patients an unlimited number of patients into their, into their own profile. But you know, at the end of the day, if it's not usable for the patient, then it's of no use to the therapist as well. Right? I think the funny thing about Morphoses that, and I've said this to the guy several times, we've, it's been so difficult, and it's been so rewarding at the same time as well, because we have married technologies that have no business being in bed together, you know, these layers and layers of technology, the motion capture, you know, in a in a web interface, it's mobile, responsive and or mobile optimized, and touch responsive, all of these things were quite difficult to create that seamless fluid experience for for both, both customers, the therapist and the patient, be ultimately, you know, we consider the end user being the patient. And if it's not, if it's not useful to them, if they're not, if they're not improving their physical condition at the end of the day, because they're using this home exercise program, advice and console to their therapist, then then the morphos isn't doing his job. So you know, creating those two distinct interfaces one that's desktop optimized one that's that's that's smart, smart device optimized, was was quite a challenge. But at the end, you know, ultimately, the product and the service is being is being sold to the physical therapists for for use for them to add value to their patients like like John alluded to earlier, adding value is a big deal. And so we think that the the very nominal subscription fee of morphos therapists are gonna reap multiple dividends from it, you know, just as an example, I was showing my aunt in Scoby, Montana who's been a long haul physical therapy patient. I was showing her a prototype of it and she just goes my my goodness, I need this I need this now I need this right now. Can I have this right now? And I said I'm sorry, Nancy. You know this is it's it's only available for purchase by physical therapist as well. If I knew if physical therapists that had this I'm going down, you know, I'm quitting. I'm quitting. Anybody that doesn't have this. I'm going to go to who has this? So she's, uh, she's been in my year, just about every week like, is it released? Are you done? Are you done? I can I get it? Can I get it?

J

Justin Angle 20:13

That's a good sign for any entrepreneurial venture when you got people beating down your door to get more of the product for sure. And so how are you thinking about the the sort of selling cycle, you got it, you got a, you got a physical therapy clinic to take this on, maybe that clinic has multiple locations, they have multiple therapists within the clinic. And then there's has to be this, this this mechanism through which the clinic gets its patients to adopt the product meaning loaded onto some sort of a smart device? What's that kind of customer journey like?

M

Michael Gardner 20:48

Yeah, I can speak to that for a second. And then I turn it over to John, you know, essentially, the, the physical therapy industry is, is super unique in that it's very mom and pop. You know, like I said, when I was having more conversations with the guys about this, and saw the the opportunities that existed within it, you know, I discovered that 75% of all physical therapy businesses have fewer than 10 employees. So you know, it's, it's, it's beautiful, and then a single therapist and a single clinic and sign up for it, it doesn't have to be adopted clinic wide. But also, if there is a chain of, you know, if there's a if there's a 50 clinic chain in the Midwest, that wants to standardize this as part of their practice, then they would just sign up with us and enroll all of their therapists and then just say, Okay, this is part of our program. This is policy and procedure. This is our, this is our go to home exercise program. But again, it doesn't require that like, if, if just only one of John's therapists a sapphire wanted to enroll, then they can enroll, and they could use it on their own. They'd be they'd be on their way. And so the adoption, the adoption by the by the patient is driven by the, by the console of the therapist, right, so. So the therapist, instead of sending the patient home with some stick figures, and some scribbling notes, they say, here's what I'm going to do, I'm going to sign you up, and I'm going to roll you in in Morphosis which is the home exercise program that I prefer to use. And they just create a profile for them on their side. And that patient instantly gets a welcome email and they set up their account. And the, the patient gets us gets a notification anytime the therapist assigns a routine to them. They can check you know, whatever device say they're using to view the to view their routine, they can direct message with a therapist, they can track their progress through the metrics reporting. And let you know, let john speak to those features and how those features benefit both patient and therapist.

J

Justin Angle 22:41

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M

Maureen Dowd 22:52

I'm Maureen Dowd of the New York Times and you're listening to A New Angle.

J

John Fiore 22:59

But yeah, I think the, you know, the adoption rate among physical therapist is going to be is gonna be quite interesting. Because, again, like I said, it's so mom and pop and it's so independently driven, that it doesn't have the price point of Morphosis as well doesn't

really require a committee of people sitting around a budget and saying, Alright, we're gonna, you know, we're gonna allocate X number of dollars in our next fiscal year, to roll this out company wide. It can just be, you know, a solopreneur hand therapist, you know, that's a that's a one person operation. But also it can be, you know, it can be a 5000 physician chain as well. Sure. That I mean that that process seems really interesting to me.



Justin Angle 23:45

And John, I know we've had some conversations about like, Hey, can you get, I think you've referred to it as the golden hour, right, that first appointment you have with a with a new patient, you got a lot to do, in that in that first appointment, you have to sort of communicate competence, you've got to sort of diagnose you've got to devise a plan, you got a lot to do. Talk about how this sort of makes that, that that job a little bit easier in that first interaction with the patient.



John Fiore 24:18

It is a pretty, you know, power packed hour You know, when the patient first comes in for an evaluation. Basically, in most clinics and stuff our PT is included in this we have an hour to basically review the medical history, evaluate the patient, do physical testing, come up with a physical therapy diagnosis and a treatment plan and provide something useful that they can go home with because the evaluation itself can take the whole hour or so to do some type of treatment. The home exercise program is a huge part of that. Because if I say okay, let's, I'm going to give you knee sore you have some weakness in your in your quad and you your balance needs work. So if I can get on morphos, and bring up some exercises and show them what to do, and illustrated, and then give them a way to follow that more accurately, I feel like that that hour becomes much more successful. Rather than spending the whole hour, you know, in rush trying to get all the information, I need to do the evaluation, and then sending the patient home when I haven't really done any service, right? If that intangible that they can take home and use. So that's, that's the beauty of it is, again, assigning value more value to that hour, which is expensive on the patient's part, and it takes time out of their busy day. But it's also a frustration that lots of my fellow physical therapists share with me is that I've got an hour to do this. And I feel like I need to do some treatment. And I want that treatment to be effective and something they can take home with them.



Joe Johnson 25:55

Yeah, I think another really important feature of it that John's underselling, that he put a lot of time into is that John often comments about how much time you spend at night and

how much time PTs spend at night, going through and assigning exercises. And from the beginning, we've been very diligent about just limiting the, what John likes to call the click trail to get to a completed exercise routine. And by just always coming back to that, we've been able to take it to the point where you can onboard a patient and assign them their first routine in about five minutes. And so for the PT to be able to do this with the client in the room, and you know, sharing the the program with them, so they can see it going over with them and having that inorganic part of that first meeting, not only are they able to better help the patient and get them into the game using the application, but then they don't have to go home and you know, spend 15 or 20 minutes for each new patient or each new exercise routine that night. So it's bringing up a lot of time for the PTs as well.



Justin Angle 27:10

Yeah, and I would think that time, is I mean, there's, there's, there's multiple problems there, Joe, in the sense that one is just extra time and extra burden, but that disconnect that temporal disconnect between when you know John's doing that evaluation, and then finally, getting to a point where he can then deliver the follow up, there's probably something lost in that time, even for the best of clinicians. It makes me think of, you know, something we teach in advertising class, it's like get to the emotion as fast as you can. And in this case, it's like get to the value of the interaction with a therapist as fast as you can eliminate as much other garbage and, you know, distraction. as possible. A lot of that that mean, garbage isn't probably the right word. But a lot of that distraction gets in the way. The other side of this too John, I've heard you talk about this, it's like you send these patients out into the wild. And you know, they have a plan, they have instruction, you've delivered it to the best of your ability. But Morphose gives you a platform through which you can get better information about how the patient is doing if they've complied with the program, what progress they're making, what time they're spending on the app, and on probably all sorts of other metrics. Tell it tell us about what what information the therapist can glean from morphos about how the patient is doing?



John Fiore 28:34

Yeah, it's it's pretty exciting that we have the features we have on morphos. And part of the reason not only are these features that I thought were useful and critical, but also we're asking physical therapists to give up what they're using now or change the way they send exercise routine. So we feel like we need to provide a better way to do that. And what we did was add a direct messaging feature so that if a patient is halfway through their routine, and it's you know, it could be it could be late at night, it could be early in the morning, anytime a day, and they get stuck. They don't have to wait till the next time they come in and see me they can click on the message PT button and send me a message

John, you didn't give me this, you know, this squat with a kettlebell? Do you want me to do this or if they do an exercise and it hurts, they can tell me you know, John, my ankle hurts when I when I do this single leg heel raise, should I still do it, and I'll be queued next time I am in morphos that I have a message from that person and I can respond. If it's soreness, that's fine. If it's sharp pain, don't do it, you know, so we keep that communication, that line of communication open. And that's something that's optional for a therapist, they can have that active for a particular patient or customer where they can inactivate that depending on the person and their choice. And then the other the other issue with healthcare in general and physical therapy in particular are progress measures, and we have what are called functional outcome measures which insurance providers, Medicare particularly, requires us to use. And this is a form that asked questions periodically, usually, but every four weeks for Medicare, to get a functional report from the patient on how they're doing, and these are big, a big buzzword in healthcare right now. So we included some metrics questions that the patient will complete at the end of their routine, and that the therapist can customize that general ones that are standards such as pain level, fatigue level, if I wanted to know, you know, how does your big toe feel I can add that one is the physical therapist so that at the end of the routine, the the patient answers on a one to 10 scale rates, their their fatigue, their pain, their big toe pain level, difficulty level, and that is tracked, along with the completion of the routine over time, so that when I, as a physical therapist need to write a progress report for the referring provider, or their surgeon, I can include some of that metric data, and therefore justify further physical therapy and document their progress.

J

Justin Angle 31:13

Makes you think of our friend, our mutual friend and physical therapy Professor Rich Willie, I mean, what you're talking about, maybe not a big market for this, but like, it really could scale some some field research protocols and lead to a lot better data on what is effective. In terms of in terms of physical therapy, I mean, this this could provide so many benefits to so many, so many constituents. Joe, you had a follow up comment.

J

Joe Johnson 31:43

Yeah, the from a patient side, I mean, the the technical stuff that we put in here, the the direct messaging the metrics, being able to track these things, is all very important and super function on the PT side. From a patient side, too, though, what that does is we one of the kind of phrases we've used throughout is closing the loop, trying to make the experience as much for the patient as much as if they're standing there in front of the PT. Right, so so as John mentioned, when he started the, you know, if I blew out my knee, I would be in to see John doing my PT five days a week in front of John. And obviously,

that's not where we are now within the industry. But from a patient standpoint, the metrics, the direct messaging, all these different things are providing the service to the patient, they're closing that loop, they're making it as similar to being actually in front of their PT, while they're doing the exercise as they possibly can be without actually being. And so from a patient side, that's what all these features provide to that.

J

John Fiore 32:54

Well, it's kind of it's kind of a follow up to even what Joe just said, it's in the in the industry and physical therapy, adherence, patient adherence to exercise programs that they're sent home with is at best 50%. So we have a lot of work to do, as a profession. And I and the goal is to actually track through some research with the help of the University of Montana Physical Therapy School, which has expressed interest in helping us with this to sort of track does morphos in fact, create a higher patient adherence rate, and if we can show that and demonstrate that it will be huge for for the industry as a whole. And, and again, that's sort of that that do good side of morphos, we're trying to get people to, to sort of embrace and become an active part of their rehabilitation. And to do that, you got to do the work. And if we can help them do the work 70% of the time, instead of 50% of time or 80% of time, then that would be you know, a huge breakthrough in the industry.

J

Justin Angle 33:52

Absolutely. You know, Michael, it occurs to me that, you know, we I asked you previously about who the customer is, I mean, another player in this game, are the insurance companies, how have you all been thinking about insurance companies? And because, you know, you would think this is going to be a lot easier if you can get insurance companies to adopt some interface with the cost of providing this to patients.

M

Michael Gardner 34:16

Yeah, we're, you know, I think john might be better equipped to answer that than myself because he deals with insurance companies every day. However, you know, there, I believe insurance is currently somewhat resistant to being billed for non face to face visits and with the exception of telehealth or telemedicine visits that have now become a lot more Well, at least, you know, Medicare has become a lot more forgiving as far as the the billable hours because of the pandemic of course, and you know, to that to that effect, and to that extent, morphos will be launching a telehealth feature before the end of this year. So, you know, launch today with 30 days from now we're gonna have telehealth as well, so we're gonna be constantly improving. The insurance companies definitely play a role. But I believe john, correct me if I'm wrong at this point, with the exception of

telehealth, there's an ability to bill insurance for the services being provided through Morphose.



John Fiore 35:18

Yeah for for a patient doing an exercise routine at home, Physical Therapists can't bill for that. But what we are hopeful that will happen is with the metrics data, and of course, with the telehealth communication feature where I can actually have a telehealth visit with a patient review any questions they have, as well as reviewing their metrics and applying that metrics data to my electronic medical record or EMR system. That would be in theory of billable, billable time. But we still have to kind of tackle that question with insurance companies. I think once we once we're up and running and can demonstrate the strengths of morphos, then we'll we'll tackle that definitely.



Justin Angle 36:00

Well, it just seems like there's a ton of upside for insurance companies as far as what they could learn about what works and what doesn't. Yeah, Michael.



Michael Gardner 36:10

Yeah. And I think, beyond you know, just what the therapists can bill insurance is that, you know, the benefits Morphoses that with this increased patient adherence and with the, the anticipated better outcomes on the patient side, the patient's less likely to give up and their grind to actually continue to make those appointments with their therapist, because they're seeing improvements. They're feeling better right there. They're not just going to succumb to a lifetime of chronic pain. They say, you know what, Wow, this is amazing, like my slipped disc, it actually is it It feels a lot better now. And you know what, though? My knees been bugging me for the last few years and I just ignored it. Can we work on that? can we can we go down that road and see what that might? You know, see what see what see what we can do there. So I think that you know, Morpheus is gonna end up from a dollars and cents perspective, it's gonna it should increase the patient retention which increases their you know, the therapists overall revenue goals. So whether or not they can bill insurance for the services that Morphoses stepping into provide. There, there should be and this is something that we plan to track and, and be able to, to report out on is the retention rate, which is just is such a big deal, because I think there's so many, so many patients just simply give up because they get home and they're not motivated. They don't understand. They're not getting better. And they just say forget it.



Justin Angle 37:35

Well, speaking of of giving up, and actually not giving up and sticking with it. I mean, Michael, you slipped it in there, but we should commemorate the fact that that that you all launched today the product is live. And that's something to celebrate and congratulate knowing how hard and long you've all worked on that. Thinking about that. And let's start with you, Joe. Can you reflect on, I mean, you've been you've been an entrepreneur at multiple levels, and a variety of businesses like how do you think about or what have you learned through this journey? If you could sort of give one piece of advice to some budding tech entrepreneur, what would it be?



Joe Johnson 38:14

It's always way easier and takes way less time than you think.



Justin Angle 38:17

Of course, it does.



Joe Johnson 38:19

lean into that.



Justin Angle 38:22

It's always a lot cheaper too.



Joe Johnson 38:24

Yeah, right, time is never money. The we're just you could you could imagine, as we're finally getting ready to push this thing over the finish line, or the first finish line. We've been reflecting on this, John and I, in 2015, I had neck surgery. And so the fall he was he was helping me. And we started banding around these ideas and kind of looking, you know, trying to articulate what he saw as you know, the major deficiencies in need. And the winner there. And in the spring we started we started actually putting together what we like to imagine as the, the, the junkyard version of this, where you know, we just kind of made it happen with technology, zoom in again, wouldn't really scale and everything but it was enough to get a good proof of concept. And it's, it's been it's been really challenging more so most of my background I'm in general construction, most of my background therefore is in service. And so actually producing a product you know, trying to make a

better mousetrap is different than the you know, you have to you have to go through and actually create this product in a vacuum, you know, with with whatever help you can get or whatever. You know, kind of true thing out you can get by talking to other professionals but it was a really different process for both of us because john, also, you know, coming in PT is coming from the service industry, you know, where you can scale it up, you work by yourself, and then you hire somebody, then you hire two people. And slowly but surely the business grows. But going in and essentially into the basement and tinkering until you come up with something that, that you're happy with has been a very different process and super rewarding. But also, it feels much more like, you know, the three of us on an island, just trying to, to put this thing together, and then, you know, kind of release it into the world. It's been very, it's been very interesting, and not as maddening as I would have thought. It's, it's, it's been fun, for sure. Well, that's an intellectual challenge.

J

Justin Angle 40:46

That's heartening to hear Joe. Michael, what have you learned?

M

Michael Gardner 40:51

Um, I have learned that entrepreneurship is not for the weak of heart. It's, it's an incredibly tough occupation. When people ask me what I do for a living, I often respond as well, unfortunately, I'm an entrepreneur. And so unfortunately, Why? Well, it's kind of thing that you can only do if you're willing to lose everything, at any moment in time. So I've learned how to meditate better. I've learned how to breathe myself to sleep and, and prioritize problems. Because you can't tackle everything at once, right? You know, like the old saying, How do you eat a whale, and it's one bite at a time. And that's where you just got to start with the start with your fork and the knife and just carve out the little pieces until you get through the whole until you get through the whole whale. Yeah, I've been involved in several ventures. And I would say that this one has taught me the greatest amount of patience. You know, this is it's been very, it's been very bootstrapped. And it's, and doing this kind of thing really requires a lot of patience and determination. And it's really great to have partners in the project that will uplift you when you're feeling down. So you know, I think we were talking about this the other day doing something totally on your own, you're more likely to throw in the towel at any given point in time when you when you get frustrated. But it's great to have partners like Joe and john, where you can say, I'm frustrated by XYZ. And they can say, you know, take a breath, take a break. Let's talk through this. And let's keep going. Let's just keep trucking along. So I think, you know, I think having having really strong partnerships, is an important part of entrepreneurship, and startups and ventures like this kind of thing.



Justin Angle 42:35

Indeed, the team is critical. John, you've probably been mulling this over the longest. Yeah. What have you learned in this journey?



John Fiore 42:45

It's, it's been, it's been probably one of the most interesting journeys I've ever taken definitely professionally. And as a business owner, and started Sapphire physical therapy by myself and the sole owner, still, I'm, I'm haven't been accustomed to working with a team to develop something from scratch. So it's been I've been able to help accomplish that with Joe, and Michael, and there's no way I could have done it by myself. That's just obvious. And so I think what I've also learned is, so many times, you know, people have ideas, and often really good ideas. But in order to execute those ideas you need, you need to surround yourself by people that are smarter than you or have more patience than you or have more intellectual experience than you in an area in order to make that happen. And I think the the combination of the three of us has has gelled to the point where the three of us is why that why morphose has happened. It's not just because the idea was a good one, but it's because we the way we are able to communicate and interact and work and kind of make this dream happen.



Justin Angle 42:49

Awesome. And john, finally, last question, tell us about the name. How did you how did you guys come up with this name?



John Fiore 44:11

To me, this product transforms home exercise programs for the physical therapy industry. So I thought of the word metamorphosis and thought it was a metamorphosis. We can't use that. And I just just like morphos came to my mind and I just remember just like blurting it out, I had no no clue at the time that there was a morpho butterfly which is ended up being our logo. So we found this cool iridescent blue butterfly called a morpho butterfly that is our now our logo. So it was just kind of one of those sort of spontaneous thoughts that came to my mind often do, and and it stuck. So hopefully it'll be a catchy, catchy household name very soon.



Justin Angle 44:53

Let's hope so. So, speaking of that, where can interested listeners learn more where learn

more about morpho? Where can they find you online?



John Fiore 45:02

So that'd be gomorphose.com Gomorphose.com. We're available now. \$35 a month.



Justin Angle 45:11

Awesome. Well, Joe, Michael, john, such a pleasure to learn more about this track this journey over time, and I'm really excited for this next chapter. And yeah, all the best. Thank you for what you're doing for this community. But beyond that, yeah. Thanks for coming on the podcast.



John Fiore 45:31

Thank you, Justin.



Joe Johnson 45:32

Thanks so much.



Michael Gardner 45:34

Thank you for having us.



Justin Angle 45:36

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