



## **The Construction User 2.0**

### **Episode 19: Healthcare Over Sick-care: A conversation with Larry Bradley**

Kirk: No one ever says, hey, let's talk about healthcare, and think it's going to be a fun conversation. But today's guest proves that very, very wrong.

He worked with the Penn-Del-Jersey NECA Chapter for 27 years in virtually every capacity of association management, serving as the Executive Director for 18 years. He officially became the Executive Secretary Treasurer of the National Electric Benefit Fund, and appointed Executive Director of the NECA IBEW Family Medical Care Plan.

He was inducted into the Academy of Electrical Contractors in October of 2002, which is NECA's highest honor to recognize exceptional and outstanding service to the electrical contracting industry.

Now retired, he is an author and healthcare advocate for construction workers across the country. Please help me welcome for this conversation, Larry Bradley.

Thank you so much, Larry, for joining us today. It's great to have you here.

Larry: Thank you. Appreciate the opportunity to talk.

Kirk: So real quick, I always try to keep these really fun. I want to start with a ridiculous question, and that is, what's the last song you got stuck in your head?

Larry: That's really easy. It's been stuck there for a long time, but I use it in leadership training, actually. It's a song by The Buckingham, a classic rock group in the 60s, and it's called Kind of a Drag.

Kirk: How do you use that in leadership training? I can guess, but how do you apply that to leadership?

Larry: Well, one of the things I teach is the use of language in leadership, because leadership is influence. We're always trying—whether it's personal, professional, every aspect of our life—to influence people. What I learned was something really cool, that this song by The Buckingham, recorded in 1966, Kind of a Drag, I get people to call me up and say, before I talk about what I called for, let me tell you something. I can't get that damn song out of my head.

The song itself contains what I call linguistic opioids that light the pleasure center of the brain when you hear them. That's why hits become hits. That's why we become attracted or more influential or not, based often on the language we use. Language can be hypnotic, as you know, but it also can be opioid-like. This song in 2 minutes and 3 seconds has 37 linguistic opioids in it. That's why we love the song. If you hear it, you'll get [...]. I'm warning you. It'll get stuck on you.

Kirk: This is just really funny because, obviously, you know where this is the construction industry and your background is construction as well. As you know, I'm the director of communications and my background is in cognitive communications.

You're one of the few people that I feel like I have to keep myself from nerding out about linguistic opioids because that's my whole field of study. My dissertation was about cognitive communications, being able to bypass and get into people's brains with things like that. I love that that's coming up. That's great.

Larry: You're probably familiar then with the study Harvard did on the word 'because.' They said that when you ask someone for something, any of us in any aspect of our lives, the general compliance rate is about 63%. So 63% of the time you're going to get what you asked for just because you asked for it.

But what Harvard learned was if you stick the word 'because' in the request, the compliance rate goes up to over 90%. Actually, people want to know why I'm doing something. They said it didn't matter what followed the word 'because' it was irrelevant. Just the word itself because it implies in its own self that there's a reason I'm asking you.

Kirk: That there's a reason. It adds legitimacy and weight to the request, even if it's because I said so. Again, it doesn't work terribly well in certain contexts, but it works right on my children.

Larry: I teach these people, wherever you can inject that word in your sales process and your influence process with your customers, with your employees, with your subordinate, whomever you're trying to focus. Why not? It doesn't cost you anything to add the word.

Kirk: We're getting off to a great start. I love this. You were leading the IBEW and NECA National Healthcare Plan for 13 years. Were some of these leadership things that you were able to use and implement in that?

Larry: Absolutely, because I had twofold responsibility. One was to lead and run the organization itself, the healthcare plan, national healthcare plan, very large plan. But it was also to promote the plan out to the world in the IBEW because local unions could join that plan as a national plan and basically get out of the healthcare business.

I was able to use linguistic opioids. I was able to use language in all of my presentations. I layer this stuff in there. It's obviously only for good purposes, but we grew the plan 10 times its size in about 10 years.

Kirk: I love it. Just on its face, congratulations. That's a huge multiplier in a relatively short period of time. What were some of the biggest hurdles you came across during that period?

Larry: Healthcare.

Kirk: Say no more.

Larry: It's 24/7. It doesn't stop. I also ran pension plans, annuity plans, and 401(k) plans. There are really no pension emergencies. But in healthcare, there's a ton of emergencies and it's all the time. It doesn't sleep on weekends or nights. It was just a constant, always trying to provide excellent service to people in a not so excellent environment, because you're dealing with so many different players and platforms out there.

We use, for example, Anthem Blue Cross Blue Shield. It's a behemoth, so everything doesn't always go smoothly, nor did it in my shop. We had issues, bumps and bruises along the way, too, and implementation was a big one. When we were implementing and bringing in a new group, you try to make that runway as smooth as possible.

I always tell people it will not go perfectly, but I can tell you this. We'll own our mistakes very quickly and we'll fix them very quickly, because that's what leadership is about. You can't unring a bell, but you could fix it prospectively and take care of business. And that's what we did. I think we did very well.

Kirk: When someone is dealing with their healthcare, it's never for a good reason. The entry point is something is wrong. Did that prove to be an added impediment into the process? You're never dealing with someone on the best day of their life.

Larry: Absolutely correct. In fact, so much so that I basically don't call it healthcare. I call it sick care because the point of entry, as you said, someone gets sick. I need my healthcare. Otherwise, you're not even thinking about your healthcare. You don't think about it until you need it.

In America, western medicine, we provide sick care not healthcare. And frankly, it's out of control. Think about this. We spend two to three or more times on healthcare than any and every other nation on earth. And we're taking more prescription medicine than everyone on Earth. We're taking 25 million pills per hour in America, yet we're getting sicker, quicker, and younger. Why is that? Because we're not providing healthcare. We're providing sick care. We did something really phenomenal about that, too.

Kirk: I was actually just listening to another podcast in this industry. It was about a guy who kept getting eye infections on the job site. Dirt, dust and stuff was getting his eye. He kept going in and having these eye surgeries where they had to, without getting super graphic, basically removing really bad cysts and styes from his eyes, because just all the dirt and the things, and even eye protection wasn't.

After four surgeries in four years to remove these things, the doctor finally said, if you just wash your eyes with Johnson & Johnson baby shampoo—not to be all overly commercial—every day at the end of the day, just really rinse your eyes out with tear-free baby shampoo, this will probably stop. He's like, that was 12 years ago, and I haven't had one since. Why didn't they say that the first time I had surgery?

Larry: Unfortunately, a lot of the great remedies are very inexpensive. That doesn't bode well in a system that's built around money.

Kirk: Exactly.

Larry: I remember years ago, Johnny Carson telling a joke on the show. He said, you know why you cannot read a prescription, the handwriting? He said, it's a note from the doctor to the pharmacist. What it says is, I got mine. Now you get yours.

Kirk: That's funny because it's truer than it should be. You wrote a book called Tips, Strategies, and Secrets to Get and Stay Well in a Very Sick World. Can you talk to me a little bit about that and how that plays into all this?

Larry: Absolutely. I took the healthcare plan back in 2011. I asked the trustee bosses at the time, what did I do to piss you off, by the way, that you gave me the healthcare plan? A couple of years later, my 32-year-old daughter then was diagnosed with breast cancer. She's 32, mother of two boys, and wife. She went through the whole regimen.

She's fine today. She's 10 years cancer-free. We pray every day that it stays that way. But between Kate's experience with cancer so close to us, obviously, and my experience in the healthcare system, I got to see firsthand as a healthcare insider, what works, what doesn't work, and what's out there.

The book is really written around just what you said, tips, strategies, and secrets to get and stay well. There are simple things that we can do that are non-toxic, non-invasive, mostly free, that are powerful in enhancing our wellness and our immune function in the human body.

People just generally don't know about it because as the world turns, here's what happens. I'm going along with my daily life. Something erupts. I get sick or a family member gets sick. We go to a doctor, we get a prescription, we take the prescription, and we get well, and we move on

with our lives. That's the general model that people understand is called healthcare. It's really called sick care.

The book is designed to open people's eyes, hearts, and minds to say there are some other things here that are pretty amazing that a lot of people don't know about. I was compelled. I was always a curious, ravenous reader and self-improver, anyway, but when this all occurred between my daughter and this healthcare experience, I said, I got to do something. So I took it upon myself to say, I'm going to write a book. And I did.

Kirk: That's awesome. I wrote a book a few years ago as well. How was the experience, the actual writing, the compiling? How did you find the experience of writing the book?

Larry: It was fun. As you well know then, it can wear you out. But I had a ball doing the research because I do everything that's in the book that I recommend I do, because I eat my own cooking, as they say.

But here's a weird story. Listen to this. I'm at a John Maxwell. I'm a certified leadership coach with John Maxwell. John is an amazing man. He's written more on leadership than anyone in the history of the world now. Yet, he would define leadership in one word. It's influence. Nothing more, nothing less.

I always tell people, if you want to be an effective leader, I don't care if it's leading a family, leading a business, leading whatever, association, become a good influencer. I teach the tenets of influence, like using Bob Cialdini's work in the book Influence, which he wrote.

Back to John Maxwell. I'm at this week-long retreat, training with John and his team. John's background was a preacher at first. He said, look. On Sunday morning, not optional, no strings attached, but I'm going to do a Sunday morning service if anyone wants to come down and hear it.

All day Saturday, I'm thinking to myself, no, I'll skip that. I'm not going to go to that. It was eight o'clock Sunday morning. Well, for some reason, not only did I go, and I sat in the back in case I needed a quick exit, but I took a book, a tablet, and a pen. Who takes a tablet to services? Many people do, but I thought it was weird that I did that.

I sat there and I started questioning myself. I said, why am I here? What I meant was, why am I here to listen to this eight o'clock Sunday morning service? I'm not really interested. Why am I here? I will tell you, almost as if it was divine intervention, that question morphed into, why am I here on this earth? What is my purpose?

I'm telling you, Kirk, it was like the pen became possessed. I just started writing ravenously. What I produced would become basically the index or the syllabus for my book. That question, why am I here, can be pretty powerful. If you told me that I would go to a Sunday service titled

The Women of the Bible at eight o'clock on a Sunday morning in Orlando, Florida to basically sketch out, I would come out of that service with the index, basically, all the topics for my book, I would've told you you're out of your mind.

Sometimes, you have to let life take you where it wants to take you. That was a weird experience, but I'll tell you, it was an intervention as far as I'm concerned.

Kirk: That is a fantastic story. I'm big on those triggers, those linguistic and life triggers that change and shape you. That's a great one. It could be at an 8:00 AM service, it could be riding a motorcycle, it could be swinging a hammer.

Einstein said he got the Theory of Relativity working at a patent office just because the process of seeing ideas coming through opened up his mind to new ideas. You can find truth where you find truth, and you can find those moments, which is just really cool.

Continuing on that theme but then moving to the world of more construction, like you said, we have sick care not healthcare, what can we be doing in a day-to-day on a job site that can make it more healthcare? What can we be applying to our lives and job sites to keep our guys healthier?

Larry: I tell people, if you were to ask me—I don't care who the 'you' is, I don't care if you're a mom, a child, a construction worker, a construction owner, whatever you are, you're a human being—what's the number one thing that I should be doing right now for me and my loved ones in this vein of wellness, in this world we're living in, I would tell you, learn to manage and mitigate stress in your life and the life of your loved ones. You'll never eliminate it, but you can greatly minimize or mitigate it when you learn some basic principles.

In fact, in the book, there's a chapter called MESS Cleanse, MESS standing for mental, emotional, spiritual, self cleanse. We do body detoxes, but how often do we cleanse ourselves or detox ourselves emotionally? The CDC tells us now the number one delivery system for disease in America is stress. How's that stress? Because today's stress is chronic.

You could have acute stress, like if you were a cave person and a lion was coming out to eat you. That's acute stress. You go into fight or flight and either become the meal or you escape. But when you do escape, then your body goes back to homeostasis.

Today, it's a bad boss, it's health problems, it's a problem with the parents, problems with the kids, canceled flights, traffic jams. They're chronic. We're in a constant state of stress. The stress hormones, namely cortisol, is constantly producing in this stressed body, stressed mind. By the way, they're inseparable. That stress that creates inflammation via cortisol is basically the red carpet for disease inviting you in.

My book is basically about what I teach people. I said, you want to make yourself and your loved ones the most unwelcoming host for disease. Like I said, a lot of stuff is simple, fun, mostly free.

There's no peddling in there. These things work and there's all science behind every bit of it. I would tell people, learn to manage and mitigate stress, and there are direct processes to do that.

Kirk: Does your book cover it all? Being sick is one thing, but we're coming out of mental health awareness and suicide prevention awareness month. Suicide's a big problem, especially in the construction and the trades right now. How do we address that? How do we eliminate stress and eliminate those stressors in a job that is just at its core, very stressful?

Larry: I spent 48 years in the construction industry. We're tough people. We're rough, tough people. We work in construction. When you start talking about stress and stress mitigation, things like deep dive, [...] breathing, things like meditation, 10 years ago if you'd have said these things that I now promote, to me I would've said this is hippie stuff in the sixties.

Now, I do it religiously. I will tell you, I only do it because I'm an Irishman. I could go from 0 to 60 in a heartbeat. I was four times the CEO at four different enterprises. I used to say that I'd get angry for sport because of my ethnicity, until I actually learned, it was largely my wife saying to me, you're going to kill yourself if you keep it up. You really get wild up there with the anger and the upset. I did it out of necessity that I had to learn to manage and mitigate myself.

By the way, be a better person. Be a kinder person. If you're nasty or if you're kind, if there's a problem, you're going to find it and resolve it. Either way, it'll get you there. Why not choose the kind route. People have enough on their plate. Look at what's been going on since the post-pandemic with our school-aged children. Suicide has doubled.

These kids, you're talking about reading and math scores plummeting in America because presently, these kids may be in the classroom or they may be in front of the computer, but their minds are not. They're distracted and they're socially isolated. That's what's causing a high level of stress and a lot of it are these devices and so forth.

To your point, I think it's a matter of actually implementing training. I'm working with a contractor now, and we're doing mindset and leadership training together as one. And it's blowing people's minds. Like some of these tough guys, when they sit down and have a softer conversation about what really matters, what is really going on, I'm seeing people break down. I'm seeing people let it out. I'm seeing all kinds of great stuff go on. I think for a long time, our industry was hostage to the notion that we're supposed to be tough.

By the way, this also bodes very badly. This distracted world we're living in, this stressed out world we're living in, you know that our industry as a whole, safety's a big, big issue. I tell people in electrical, we have something that you can't see, you can't smell it, but it could kill you. So don't be too distracted when you're out there doing your work.

I think it's a matter of structuring, training, and teaching for people in our industry. The receptivity of it's been mind-blowing to me because I'm not getting the resistance, like oh I'm a tough guy. I don't get ulcers. I cause them. Remember that stuff? I'm not seeing that. I'm seeing people open up and say, yeah, I need some help.

Kirk: To that exact end. I remember a non-sequitur segue. I was in the military for a while. I was always embarrassed and ashamed that I was big into yoga. I always did it hidden, like away from the other guys. I was big into yoga and I would do stuff because that was just my meditation and my zen.

I was talking to some guys once and talking to a Navy special forces. He would be very clear to say, not a SEAL. He was Navy special forces, EOD, not a SEAL. I was talking to him and he's like, what's your fitness regimen? And I was like, eh, I don't want to talk about it. He's like, no, what's going on? I told him, I'm into yoga and meditation. And he's like, dude, I've never been with a special forces person that doesn't do yoga, that doesn't do mindfulness exercise. He's like, you can't get into the level of peak performance if you aren't getting your body right, not just from a pumping iron standpoint.

I remember, I was younger, I was in my twenties, this Navy special forces dude saying, do not be ashamed of that. Peak performers, that's who does that. It's peak performers.

Larry: Everything that is mostly successful, let's say, really to me begins with awareness. Becoming aware of yourself, who you are, what your body's about, what your mind's about, and learning to develop that relationship with yourself.

The most important relationship you have on earth is the one you have with yourself. It's called our self-esteem. That, by the way, is also plummeting. I think that that's an epidemic in this country, especially with our young people. They need to be taught what self-esteem is, and they need to be led on how to increase it because it will affect every single aspect of their lives. Everything.

Kirk: All the things we're talking about, we started off at the conversation at the top, healthcare is almost a punchline at the end. There are just so many things wrong with the system. The construction industry—union, non-union, everything—there are definite cracks in the system that we're trying to solve. The self-esteem and the isolation. We're talking about three overlapping systems with unbelievable, insurmountable "problems." How do we get union construction, US healthcare, personal awareness and wellness? And how do we make it work more effectively for us?

Larry: I'll start out with a straight answer: I would say results. Our healthcare plan, we are implementing something that no one, I don't think in this country, is doing. It's a pilot program



that actually goes back five years when it first came about. It was implemented just over a year ago with a small group of people. We just agreed to enhance the size of the pilot.

The fourth leading cause of death in America right now is adverse drug reactions. That's adverse reactions to prescribed medicine. Fourth leading cause of death. It's driving probably 80% of the spend in a healthcare plan, and the healthcare folks really don't even know it.

The big driver of healthcare of dollars in America today is chronic illness. About 70% of us have at least one. You see the doctor every three months and you get a script every month. You're a customer. You're not a patient anymore, you're a customer. Who wants to fix that? You fix that, you lose a customer.

But I would say results. What we did was we decided to get into pharmacogenomics testing. We're testing people with a saliva test, and then we can look at all the commonly prescribed medications and their unique DNA, their unique gene pool, and say this drug is working. This drug is not. This is where a drug needs a higher dose, a lower dose, or you don't need it at all. If you could know what a pill or a drug's going to do before you put it in your mouth, good, bad or ugly, wouldn't you want to know that? So we're doing that.

The other thing is nutritional depletion. Vitamins and minerals are depleted when we're on drugs. They're depleted anyway, but drugs make it worse. We're looking at the nutritional depletion, and we're leveling them up with pharmaceutical-grade vitamins and minerals.

Next step, a third and final step will be food. We're going to be prescribing food to your door that is kind to and in line with your DNA and your gene pool. You could eat a tomato. I could eat a tomato. Have two entirely different reactions. One good, one bad. In fact, I'm going to be up in Boston next week talking about our preliminary results. I could tell you story after story that is just mind-blowing what's going on in people's lives with this simple program.

We have a guy that's on Plavix. It's the third most commonly prescribed blood thinner in America. Well, one in three Americans don't metabolize Plavix correctly, but your doctor doesn't know that. That's why the doctor says, let's try this. Come back in a month, six weeks.

We know. We told this guy, you have an 8½ times greater opportunity for a cardiac event because you're on Plavix. Let's change this. Let's go to your doctor. We do everything through their doctor. But no doctor's sitting out there studying this. They don't have time to study this. They don't have time to see patients, let alone learn this stuff. We're looking to get sick people well, and keep well people healthy. That to me is the ultimate answer in healthcare in America. That's what we have to do.

Kirk: Who's the 'we' here? What organization are you spearheading for this?

Larry: This is the healthcare plan that I ran.

Kirk: That's what I thought. I just wanted to make sure.

Larry: It's the IBEW NECA plan.

Kirk: That's incredible. That's an incredible service and opportunity for those people to get, like I said, a tomato for two different people is a very different metabolic response. So making sure that you're eating right for you and getting the results you need for yourself.

What's the future look like? We're coming out of a pandemic, we're going into all of this stuff, we have all these healthcare problems. What's the next step? You were a four-time CEO. What are all the CEOs that are listening? What's the next step? What does the future look like? What do we do? How do we make it work?

Larry: A lot of Americans think we have the best healthcare in the world or we're among the best. We're actually closer to dead last. We ranked 37th overall in health outcomes, so we're not good at it.

Here's the thing. If you break your arm or you need a heart valve, you are in the right country for healthcare. But if you have a chronic illness, you're not. I'm saying what we have to do is learn to get sick people well and keep well people healthy. There are simple solutions to doing this.

Like I said, this pilot program that we're doing, it's a triple play, if you will. The pharmacogenomics know what the medicine will do, or even if it's necessary, or what the dosing is or should be. Then it's the mineral-vitamin depletion. Then it's the food. Ultimately it's the food. You can't work with a bad diet. But we coach people. We work with people.

I'm going to tell you something. Five percent of the healthcare plan's population—I don't care which group it is—drives 80%–90% of the spend. They're generally what we call polypharmacy. That's who we targeted first in our pilot. It's diabetics on five or more meds. These people are really sick.

You know what the resounding reaction we're getting from the people is? No one's ever cared for me like this in my life, about me and my health. But we're seeing results. We're seeing a recluse 30-year-old, overweight, diabetic female who wouldn't even come out of her room, now in the gym five days a week, lowering her weight, lowering her A1C and socializing. We gave her her life back. And her story after story after story like this.

Let me talk about genetics for a second, back to my daughter. Post-diagnosis, post-treatment, anybody that's been there knows it's no picnic. It's a brutal regimen. My daughter had her genetics test, and not through me. She just went and did it. They read her results to her. Her cancer was estrogen-fed. She learned that she metabolized some things that she consumed regularly into estrogen, and all kinds of other stuff about her body and her genetic makeup.

They said to her, what do you think now that you've had your genetics read and you've had this report? And she said, I think had I had it before my diagnosis, I would've seen cancer walking up the street looking for me. How powerful is that?

I'm committed to help as many people as I possibly can, to learn what's going on in here before the event. Why wait for a life-changing event to change your life? It's a familiar tag. Why wait for that event? Most people do. Like you said, sick healthcare only matters when I get sick. It shouldn't.

Kirk: You've recently retired. What's it look like now? What does the fight look like now?

Larry: I am still working with the healthcare plan on a consulting basis. I'm consulting to corporate America on leadership mindset, stress mitigation, and other things. I'm having a blast. I'm loving it.

I'm just about to release a book in about three weeks with my daughter, a parenting book. The book we're talking about, and the actual title is—I don't know if I can say this—it's Wake the F Up: Tips, Strategies, and Secrets to Get and Stay Healthy in a Very Sick World. That's going to be coming out very soon. I'm working with my book coach now. We're trying to figure out dates. They're all done, written, ready to publish. They'll be coming out soon.

Kirk: I'm going to have to pick that up. It sounds awesome. It sounds incredible. I could spend two hours talking to you just about linguistic triggers that we started with. This could go all day, but I want to be respectful of your time. If ever you're in the DC area, please drop by. Let's grab lunch. This has been incredible, and we very much thank you for your time.

Larry: Thank you, Kirk. I look forward to meeting you one day. I would love to continue the conversation.

Kirk: As would I, sir, as would I. Thank you so much.

Larry: Thanks. Have a good one.