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**Statement of Wayne B. Jonas, MD  
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**Hearing on “Health Care Reform Legislative Options”  
Senate Committee on Health, Education, Labor, and Pensions**

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Thank you, Senators Kennedy and Enzi, and Members of the Committee for the invitation to testify about the central role of prevention, health promotion and integrative health care practices to address many of the ills of today’s health care delivery system. First, let me congratulate you on your leadership in producing a bill and offering legislative options that go beyond the issues of medical care coverage and payment, and open an opportunity to deliver the central factors that we know can produce health and wellness, and enhance productivity and healing. In my testimony I will emphasize the key aspects of your bill that could create a 21<sup>st</sup> Century Prevention and Wellness System and, with it, a flourishing nation.

My name is Wayne Jonas. I am a former Army family physician. I see patients weekly at a Military Medical Center; am a Professor of Family Medicine at Georgetown University; and am President and CEO of the Samueli Institute of Alexandria, Virginia, and Corona Del Mar, California. I have formerly served as Director of the Office of Alternative Medicine at the National Institutes of Health, the Director of the Medical Research Fellowship at the Walter Reed Army Institute of Research, a Director of a WHO Collaborating Center of Traditional Medicine, and a member of the White House Commission on Complementary and Alternative Medicine Policy.

The Samueli Institute, a 501(c)(3) non-profit medical research organization, investigates healing processes and their application in promoting health and wellness, preventing illness and treating disease. The Institute is one the few organizations in the nation with a track record of research on complementary and integrative health care, healing relationships and military medicine.

It is axiomatic that the goal of health care reform should result in - health. The practices, products and people that prevent disease, improve function and enhance well-being must also be sustainable and have reasonable or low cost. To achieve this goal, our culture should be empowered to create wellness professionals, technologies and an industry that is as powerful as our disease treatment system is today. We cannot expect to improve the health of our citizens through more or better access to the current broken system, or by simple payment or insurance reforms on that system. **We need a new vision and approach to creating health. We need a Wellness Initiative for the Nation (WIN).**

In previous testimony before this Committee, I presented an overview of what a Wellness Initiative for the Nation (WIN) would look like (<http://www.samueliinstitute.org/news/news-home/WIN-Home.html>). We and our partners documented the compelling evidence for its impact on the prevention and management of chronic disease, and detailed the policy steps needed necessary to implement a Wellness Initiative across the human lifespan. In addition, we held community discussions and submitted dozens of stories and examples of how these healing practices are creating health for everyday Americans (<http://www.siib.org/news/news-home/WIN-Home/CommunityDiscussion.html> ). We are pleased to see that many of these steps are now in this bill. Applying a wellness and integrative health care model would:

- Ensure that prevention and chronic disease management are broadly effective;
- Reduce costs and stimulate sustainable investment; and
- Reduce suffering and improve the productivity and health of our nation.

We know what factors will prevent disease and enhance function for 70% of chronic illnesses. With the basics of food, safety and shelter available, we can create a healthy, productive and flourishing society by changing five lifestyle and environmental factors. These factors are:

- Proper substance use (no smoking, and appropriate alcohol, drugs, diet, and environmental chemicals);
- Adequate exercise and sleep;
- Stress and resilience management;
- Social integration and support; and
- Selective disease screening and immunization.

We also know that health and illness are a continuum—those factors noted above will prevent disease long before it is diagnosed and improve function long after disease develops. It is no longer rational nor scientifically sound to wait until disease reaches an advanced diagnostic threshold, and then provide expensive late-stage interventions. The new vision of health and disease management is based on self-care and lifestyle management, which cannot be primarily located or directed by the medical industry. Community education and primary care practices that enhance self-care, lead by nurses and allied health care practitioners and incorporating integrative health care practices, are the best way to create health. In this 21<sup>st</sup> Century Wellness System, both prevention and chronic disease management are unified.

The Affordable Health Choices Act currently before the Committee has several provisions that can help create this 21<sup>st</sup> Century Wellness System. I urge you to enhance these provisions as the bill moves

forward. **The most important of these is The National Prevention, Health Promotion and Public Health Council [S 302]!** By examining policies across the multiple agencies that either enhance or interfere with health production, the Council can move the national culture and health care industry toward prevention and wellness.

Other key provisions for creating a wellness culture and system include the following:

1. Prevention and Public Health Investment Fund [S 302]. By linking the use of this Fund to the policies developed by the Council above, the Council would have true power to create a wellness system;
2. Clinical and Community Preventive Services [S 304]. Delivery mechanisms for sustained individual and community behavioral change would be created if the provisions of this section were combined with the Community Health Teams [S 212], Community Transformation Grants [S 321], Employer-based Wellness Programs [S 334], and the Education and Outreach Campaign [S 304]. The educational system must go beyond information, however, to include actual training in the skills, values and attitudes that promote health and wellness; and
3. The Health Care Workforce section should include a section to develop Wellness Professionals as fully trained and supported as medical professionals. Leaders in wellness would encompass nurses [S 428], and primary care [S 432] and integrative practitioners. Wellness behavior and skills can further be disseminated through the Primary Care Extension Program [S 455], a National Health Service Corps [S 427], and the Youth Public Health Program [S 444]—provided the latter produced youth with leadership skills needed to deliver prevention.

If the above provisions were coordinated and implemented, a Wellness Initiative for the Nation could be launched to produce the true goal of health reform – health – from womb to tomb.

I appreciate the opportunity to appear before this Committee and I look forward to any questions.

Thank you.