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Mark Masselli: This is Conversations on Health Care. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Well Margaret, the clock is ticking. All eyes are on the Supreme Court where the decision on the Affordable Care Act could come at anytime most likely next Monday or Thursday. And I will tell you, depending on which paper I read or who wrote it, I am getting a different opinion. It doesn't look like anyone has a real clue about it.

Margaret Flinter: No. But there is a lot of interesting spins on what the consequences will be, if it stands or if it falls, and it's still being handicapped but about a 50-50 chance that the High Court will overturn at least some of the health care law.

Mark Masselli: Well if you are reading the Tea Leaves, Justice Ginsburg and Scalia made some public statements recently that could lead one to surmise which way the court is leaning. Scalia referenced a long-standing landmark ruling that expanded the government's right to invoke the Commerce Clause as having been an unwise decision. The Commerce Clause figures prominently in the Affordable Care Act's individual mandate requiring all citizens to purchase insurance.

Margaret Flinter: And in a recent speech, Justice Ginsburg extolled the virtues of "dissenting opinions" and saying that they can reach audiences outside the court and propel legislative and executive change. So Mark, what do you think? Is she indicating here that the progressives on the court might be writing the dissenting opinion?

Mark Masselli: I think we will just wait and see what the court finally rules on and that will be coming sooner than we think.

Margaret Flinter: Whatever the decision Mark, we know that it will have a profound impact on health care moving forward. And on that note, there was interesting editorial in Health Affairs this month. One major change is underway and no court ruling will do much to stop it. The emphasis is finally shifting in this country it seems from health care to WellCare, placing more emphasis on prevention, something we have always worked towards.

Mark Masselli: That's absolutely true Margaret. And it's encouraging to see so many organizations promoting large scale prevention efforts. The old adage really does ring true, "An ounce of prevention is worth a pound of cure".

Margaret Flinter: And speaking of prevention Mark, and this is a little bit of using the bully pulpit, I am hard pressed to find any justification as to why helmets aren't required for all motorcycle riders and their passengers nationally, and I think this every time I drive down the road.

Mark Masselli: You know a recent CDC report should put the fear into those who ride without that added protection. The report out last week did break down the number of motorcycle deaths; 79% of the deaths in states with no helmet laws were attributed to riders or their passengers not wearing a helmet; states with more stringent helmet laws saw far fewer deaths in that category.

Margaret Flinter: And that report detailed the economic as well as just the human toll. Hundreds of millions of dollars in lost productivity and medical costs incurred due to motorcyclists riding without helmets, just a cost too high.

Mark Masselli: Speaking of policies that affect brain research, our guest today, former Congressman Patrick Kennedy will be speaking directly to that topic. He is joining us to talk about his new organization One Mind for Research, which is seeking to coalesce all global brain research endeavors to join forces to find faster routes to cures for a variety of brain disorders.

Margaret Flinter: And FactCheck.org's Lori Robertson will give us a quick synopsis of the upcoming Supreme Court decision on the Affordable Care Act. But no matter what the topic, remember, you can hear all of our shows by Googling CHC Radio.

Mark Masselli: And as always, if you have comment, please e-mail us at [www.chcradio.com](http://www.chcradio.com); we love to hear from you. We will get to Congressman Kennedy in just a moment but first, here is our producer Marianne O'Hare with this week's Headline News.

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Marianne O'Hare: I am Marianne O'Hare with this Headline News. The White House is making preparations for what comes after, after the Supreme Court issues its ruling on the Affordable Care Act. The White House says President Barack Obama is confident the whole law will be upheld when the court issues its ruling in the next week or two, but officials will be ready for any outcome. While not publicly talking about contingency plans, the Obama Administration is apparently readying measures that will move parts of the health care law forward if the individual mandate requiring all Americans to buy health insurance is struck down. Court watchers are expecting a decision from the Supreme Court next week. Meanwhile, if the court strikes down the mandate or other parts of the law, GOP leaders are looking to ride the wave of the decision until the November election and promote a pared down version of health care reform after that.

Presumptive GOP Presidential Nominee Mitt Romney has said he would repeal the entire law and start over.

Meanwhile, the nation's largest organization, representing some 300,000 physicians, the American Medical Association, is holding its annual meeting in Chicago. There was much discussion about the cloud of uncertainty over the profession as the fate of the Affordable Care Act hangs in the balance. The group did call for an overhaul of the medical reimbursement formula. They also called for tort reform to limit the amount of money that can be sought in liability suits.

And finally what's in a sunscreen these days is hard to tell. As the season of sunning gets fully underway, new sunscreen label requirements ordered by the FDA will have to wait. The plethora of options on the sunscreen aisle will ultimately be governed by stricter labeling requirements but the labeling rules won't be enforced until December, the time manufacturers say they will be able to change all their packaging. Only sunscreens that protect against UVB and UVA rays can call themselves broad spectrum and any sunscreen with an SPF lower than 15 will have to have a warning on the label that it's not sufficient to protect against cancer and early skin aging. I am Marianne O'Hare with this Headline News.

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Mark Masselli: Today, we are speaking today with Former Congressman Patrick Kennedy, Cofounder of One Mind for Research, an organization founded to create a public-private global partnership of health care providers and researchers to combat all disease and disorders of the brain. Congressman Kennedy, the youngest son of the late Senator Ted Kennedy has spent a lifetime in public service having been elected to the Rhode Island State Legislature at the age of 21. He also spent 16 years in Congress as a member of the House of Representatives, leaving in 2010 to launch this new initiative. Congressman Kennedy, welcome to Conversations on Health Care.

Patrick Kennedy: It's great to be with you.

Mark Masselli: You know, you launched One Mind for Research as a far reaching initiative that you have called the moon shot for the mind. I think it's 50 years ago that your uncle President John F. Kennedy introduced to the country the concept that we can land a man on the moon and I think he eloquently put it back then that we are not doing it because it's easy, we are doing it because it's hard. And certainly, mental illness and diseases of the brain are so complex and varied and still so little is known about them. Tell us what prompted you to launch this One Mind Initiative and how is this organization different from brain disease research programs that are already out there.

Patrick Kennedy: Well, thank you for having me on and thank you for helping to bring greater transparency and dialogue into the whole issue of health care. Health care is not an issue, it's personal to every family in America, who has a loved one that's suffering. And I believe that we want to get to cures and therapies faster. And we know that medical research can make a big difference in securing greater discoveries and therapies that will transform their lives and allow them to live much more productive and fulfilling lives.

I believe that the answers are political. I think science is doing a great job but science is organized in a way that can maximize all the discoveries that are going on because keep in mind, we are researching the same organ, it's the brain and yet, in politics, what organizes science is disease. So schizophrenia, Alzheimer's, autism, depression, addiction; they all have different constituencies and they all advocate for research. And ultimately, if they work together, there is going to be an advancement for everybody because what's found in discovering one disorder of the brain is going to help unlock the mysteries of a different disorder. Much like when we went to outer space, we discovered new galaxies simply by our exploration. Now it's time for us to explore the galaxies of neurons in inner space.

And I think JFK's aspirational goal can serve to unite our mission. Because today, we are obviously a long ways off from researching and discovering so many abnormalities that occur because of when the brain isn't working properly. And I think that we can get to the solutions quicker than we might imagine if we organize ourselves differently. And much like the moon shot was a national security issue, I believe saving our soldiers from traumatic brain injury or post traumatic stress is going to unlock the answers for every American, who is suffering from a brain-related disorder. And in fact, we are going to lead the world if we do this research because these are diseases that know no geographical boundaries. And wouldn't it be great if United States led the way in helping to tackle one of the greatest challenges that all of humanity faces, from dementia to addiction but, in fact the stigma that comes from suffering from such a disorder? So I believe science is going to give us the two answers we need; one, the medical answer but two, the new attitude that these are medical advances, they are not moral issues as is often our society's response to treating these conditions as kind of moral failures of the individual who is suffering from a brain disorder.

Margaret Flinter: Well Congressman Kennedy, this is certainly one of those things that come across rarely which is big, bold, brilliant and audacious in what you are trying to accomplish. But let me start with one that maybe lets you lay out for our listeners something of the scope and the dimension of what we are trying to do here because well, I think there is probably not a family in America that hasn't been affected by one of the conditions you talked about. I am not sure that people realize what a toll in combination they take on the country in

terms of social and economic impact. I wonder if you would like to speak to that for a moment before we pull on some of the other threads that you raised.

Patrick Kennedy: Clearly, as I mentioned, these are by all accounts the biggest (10:23 inaudible) of illness in terms of economic and social impact, and that has been shown through study after study. But, for any family that's had a loved one that's been suffering from one of these brain-related illnesses, they know that the impact cannot be measured in economic terms alone, they know the personal toll on not only the individual, their dignity but that as a family. And the sense of shame that comes from having suffered from one of these illnesses I think is so pervasive. And frankly, the research that was done on behalf of, or I should say inspired by, my aunt Rosemary, that my aunt Eunice started in order to better understand intellectual disabilities ultimately was research that is going to provide answers for another member of my aunt Eunice's family and that's all of her children. Because her late husband Michael Sarge died of Alzheimer's and now that is a disease that's facing all of her five children. But ironically, the research to help us understand dementia did not come out of the Institute of the NIH that studies aging, it came out of the institute on children. And ironically, by doing the research on people with Down's Syndrome, we have better understood the mechanisms that are going to help us answer the challenge of Alzheimer's. We don't know where the answers are going to come from. If we are studying the brain, we need to think a lot more holistically all at once.

Mark Masselli: Now you mentioned just a minute ago Congressman that you are trying to really organize the science and sort of marshal the troops, if you will, which brings me to the fact that you have brought on a new CEO for One Mind for Research, Army General, Peter Chiarelli, who has really been a dedicated advocate for removing the stigma associated with PTSD and other brain disorders suffered by soldiers. So, tell us a little bit about the role that General Chiarelli is tackling around the issues and also how he plans to orchestrate the work that you are leading.

Patrick Kennedy: Well, if you look at history, you understand that we accomplished amazing feats of scientific endeavor. And it was all driven by national security. Obviously, we built our Interstate Highway System under Eisenhower in response to the cold war and the need for us to be able to move our country around. And of course the Moon Shot was driven by a national security raised to be number one in terms of space. Ultimately, our country really knows how organize itself if it's an issue of national security. And today, as you know, in Washington, very little gets done. The exception to that rule is if it's for veterans and soldiers. So the GI bill was passed; the tax credit for employment for veterans was passed in these last two years. These are initiatives that are emblematic of the fact that Republicans and Democrats work together for our soldiers. One of the ways that we can galvanize and organize ourselves for science is to do so politically. And I believe that the most powerful argument is making sure that those young men and women who sacrificed for all of us and if

the “signature wound” of this latest war is traumatic brain injury and post-traumatic stress then what we ought to be do about is making sure that we solve these challenges that come from injury of the brain because if we do it for our solders, all Americans are going to benefit from it.

Margaret Flinter: So Congressman, let’s talk about this ambitious goal at One Mind for Research of coalescing all the silos of brain disease research into one central clearinghouse of research data that can then be used to tackle all of the conditions. Now your organization has created a couple of programs I understand, one Knowledge Integration Network for Traumatic Brain Injury and another centralized database called the One Voice Bio-repository. Tell us more about these brain data exchange portals.

Patrick Kennedy: What modern day informatics, what it provides for us, that was really a discovery of going to outer space, these super computers, what they provide for us in doing research in brain science is an ability to connect the dots. So, if we develop standard common data elements to describe research in one area of disease research and we can make that research comparable to other areas, what we learn is that there are patterns. And if we can recognize the patterns in one area of brain science that are similar to patterns in another area, then we can get closer to a cure and we don’t have to repeat the same science. I believe that ultimately advocates are going to be the best partners in science because science won’t be able to advance if we don’t empower both families as well as consumers to enlist in this effort. The scientists can only work as effectively as the consumers will allow them. And what we are trying to do at One Mind is not do the science but help facilitate the science in the way that we organize the way it’s done.

Mark Masselli: We are speaking today with Former Congressman Patrick Kennedy, Co-Founder of One Mind for Research, which is coined for a unified approach to mental health research, shifting the focus away from individual brain disease, focus instead on the whole brain itself. I want to remind our listeners that Congressman, one of your many achievements while in Congress was that you cosponsored the Mental Health Parity Bill, which passed in 2008. And this bill, which you passionately lobbied for in the halls of Congress, was created to provide protection for people dealing with mental health issues as well as ensuring that they not be denied access to care. Talk to us a little bit about the impact that the Affordable Care Act will have on mental health services and parity in our country.

Patrick Kennedy: Well first, let me say that the Mental Health Parity and Addiction Equity Act is the law and no matter what the Supreme Court says about the health care law, parity still will stand. Ultimately, the only way we are going to see the end of discrimination towards people who suffer from brain-related illnesses is if they are empowered to enforce this law. So like civil rights, it comes down to enforcement. This health care moves forward. That strengthens

our approach to treat the whole person through holistic care and not allowing insurance companies to discriminate. The best thing that advocates can do, who care about this issue is to get involved in making sure their state insurance commissioner, in addition to the federal HHS that are in charge of implementing this law and enforcing it, that we stand up for ourselves. We need to make sure our family and friends who are suffering from brain illnesses do not end up going to the back of the bus because an insurance company or an system says they are not worthy of first class health care.

Margaret Flinter: We also want to acknowledge that you have just set such huge goals for yourself including financial and you have talked about the lack of financial resources that are made available for brain disorder research even as we have so much promise. Tell us, what are your plans to galvanize the financial, philanthropic, institutional, governmental support that you need to continue to drive these research efforts forward.

Patrick Kennedy: Well first of all, I recognize we are in very difficult times. But I also recognize that you will never get it unless you ask. And I believe that every family in America has a child with autism or a parent or aunt or uncle with Alzheimer's or Parkinson's or a sister or brother with depression or addiction. I think that if we define what the ask is from both the federal government, corporate America, from the international community that we will get to what we want a lot quicker. I believe that the money is there because I believe that the interest is there. But I believe you don't get the money if you don't define what you are going to use it for and why that money is going to be invested in something that's going to produce huge dividends for every family and for our economy and for the world. And if we are not clear, you can bet it's a lot easier for political leaders and elected leaders to ignore us if we are not organized and if we are not clear in what we want.

Mark Masselli: Congressman Kennedy, when you look around the country and the world, what do you see in terms of innovation in brain research that our listeners at Conversations should be keeping an eye on?

Patrick Kennedy: Well I think that combination of knowing what the genomic research, what our genes tell us in terms of what we are likely to be at high risk for, just much like cancer or any other illness, that we now need to know how our experiences shape the genes or affect the genes. And so we need to get the whole area of social science and marry that with the new science of genomics and be able to get a better answer as to why in some people their genes are setoff to have a particular brain-related illness whereas for other people those genes do not get turned on. So I think it's a fascinating area of science because it's combining a lot of areas of knowledge and painting a bigger picture.

Margaret Flinter: We have been speaking today with Former Congressman Patrick Kennedy, Cofounder of One Mind for Research, a global public-private

partnership to bring together the best science, technology and expertise to accelerate research and diseases of the brain to generate new diagnostics, treatments and cures. Congressman Kennedy, thank you so much for joining us on Conversations today.

Patrick Kennedy: It's been wonderful to be with you. Thank you so much for having me.

Mark Masselli: At Conversations on Health Care, we want our audience to be truly in the know when it comes to the facts about health care reform and policy. Lori Robertson is an award-winning journalist and Managing Editor of FactCheck.org, a nonpartisan, nonprofit consumer advocate for voters that aim to reduce the level of deception in US politics. Lori, what have you got for us this week?

Lori Robertson: Well, Mark and Margaret, this week, we will talk about the case before the Supreme Court on whether the federal health care law is constitutional. So this isn't a fact check exactly but I can outline the central arguments of both sides. A ruling is expected some time in this month. The dispute is over the constitutionality of the individual mandate, which requires persons to have health insurance or pay a fine. And at the root of the disagreement is the Commerce Clause of the constitution, which gives Congress the power to regulate commerce among the states. The justice department argued back in 1993 when President Clinton's Administration had proposed a health care overhaul that health care which was more and more expensive had a big impact on the economy and interstate commerce. Critics argue that the commerce law doesn't apply to health care and they argue that the government can't force someone to buy something just because he or she exists. We will find out soon what the High Court decides. I am Lori Robertson, managing editor of FactCheck.org.

Margaret Flinter: FactCheck.org is committed to factual accuracy from the country's major political players and is a project of the Annenberg Public Policy Center at the University of Pennsylvania. If you have a fact that you would like checked, email us at [www.chcradio.com](mailto:www.chcradio.com). We will have FactCheck.org's Lori Robertson check it out for you here on Conversations on Health Care.

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Mark Masselli: Each week, Conversations highlights a bright idea about how to make wellness a part of our communities and everyday lives. New York City Mayor Michael Bloomberg has a health challenge on his hands. Half of the population of the most populist city in the nation is either obese or overweight. And Mayor Bloomberg recently announced a bold new action to attack the problem at least on one front. In a controversial move, the mayor announced a citywide ban on the sale of large sized sugary drinks including sodas, sports

drinks and presweetened ice teas. The sale of any sweetened drink larger than 16 ounces will be banned at the city's restaurants, food carts, movie theaters and sporting arenas, venues that are governed by the New York City Department of Health. The City's Health Commissioner Dr. Thomas Farley blames the accelerated consumption of sweetened drinks over the past 30 years for half of the city's obesity problems. And the problem is even more pronounced in areas with higher concentrations of poverty and reliance on food stamps. Bloomberg is no stranger to controversial measures to deal with matters of public health, which he has made a priority of his administration. He is responsible for measures that have banned the sale of food with unhealthy trans-fats. He is also behind a ban on smoking in public restaurants.

These New York City-based public health policies have been adopted by municipalities across the country, creating a lasting impact on the health of other communities. Mayor Bloomberg has been trying to find ways to make soda consumption less appealing, including a higher tax on sugary drinks that failed in **Albany**. This measure will only require the approval of the Health Commission, all of whom are Bloomberg appointees. So it is expected to pass and could go into effect as soon as March of next year. A bold public policy initiative aimed at greatly reducing the consumption of a product that has contributed to poorer public health, that could inspire other municipalities across the country to do the same, now that's a bright idea.

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Margaret Flinter: This is Conversations on Health care. I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli, peace and health.

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