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JOHN S. MILLIS In 1966 the Citizens Commission on Graduate Medical Education observed that the explosive growth in biomedical science and the consequent increase in medical skill and technology of the twentieth century had made it possible for physicians to respond to the episodes of illness of patients with an ever-increasing effectiveness, but that the increase in knowledge and technology had forced most physicians to concentrate upon a disease entity, an organ or organ system, or a particular mode of diagnosis or therapy. As a result there had been a growing lack of continuing and comprehensive patient care. The Commission expressed the opinion that "Now, in order to bring medicine's enhanced diagnostic and therapeutic powers fully to the benefit of society, it is necessary to have many physicians who can put medicine together again. "!

The Commission proceeded to recommend the education and training of substantial numbers of Primary Physicians who would, by assuming primary responsibility for the patient's welfare in sickness and in health, provide continuing and comprehensive health care to the citizens of the United States. In 1978 it is clear that the recommendation has been accepted by the public, the medical profession, and medical education. There has been a vigorous response in the development of family medicine and in the fields of internal medicine, pediatrics, and obstetrics. One is particularly impressed by the wide acceptance on the part of medical students of the concept of the primary physician. Dr. John S.

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A groundbreaking prescription for health care reform--from a legendary leader in innovation . . . Our health care system is in critical condition. Each year, fewer Americans can afford it, fewer businesses can provide it, and fewer government programs can promise it for future generations. We need a cure, and we need it now. Harvard Business School 's Clayton M. Christensen—whose bestselling *The Innovator 's Dilemma*

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revolutionized the business world—presents The Innovator ' s Prescription, a comprehensive analysis of the strategies that will improve health care and make it affordable. Christensen applies the principles of disruptive innovation to the broken health care system with two pioneers in the field—Dr. Jerome Grossman and Dr. Jason Hwang. Together, they examine a range of symptoms and offer proven solutions. YOU ' LL DISCOVER HOW “ Precision medicine ” reduces costs and makes good on the promise of personalized care Disruptive business models improve quality, accessibility, and affordability by changing the way hospitals and doctors work Patient networks enable better treatment of chronic diseases Employers can change the roles they play in health care to compete effectively in the era of globalization Insurance and regulatory reforms stimulate disruption in health care

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