

EDITORS' PREFACE— AMERICA'S HEALTH CARE: WHICH ROAD TO REFORM?

We have reached a crossroads in the popular debate on reforming American medical care. No longer do we argue about *whether* our health-care system needs change; we have begun to discuss *which* type of national system we want and *how* to accomplish the desired reforms. In a few short weeks, the transition to the next presidential administration and a new Congressional class will begin. All indicators suggest that the time is ripe for meaningful health-care reform.

Thus far, however, discourse at the national level has been less than edifying. The rhetoric of politicians and policymakers continues to obscure the most important issues in the health-care debate. Further, whereas most Americans are concerned about issues of access, quality, cost, and choice of provider, reformers are preoccupied with the issue of who will serve as intermediary payer in the new system. The tasks of deciphering phrases like “managed competition” and sorting through myriad reform options have left voters appreciably confused.

This issue of the *Yale Law & Policy Review* seeks to provide some illumination. The issue begins with an introduction by Senator Harris Wofford, the man credited with having brought health care to the fore of American politics. Senator Wofford gained his victory in Pennsylvania last November by emphasizing the urgent need for national health care. Here he presents a workable reform plan.

The issue then breaks down into four sections that target different aspects of the national debate. Part I begins with the public's reaction to the growing crisis in health care. Two polling firms (one Democratic, the other Republican) put forth conflicting interpretations of recent survey data.

Part II focuses on what shapes competing reform proposals politically, economically, socially and ethically. Professor Ted Marmor and Michael Barr debunk the common myths surrounding the health-care debate in order to clarify our true policy options. Two health policy consultants examine the financing mechanisms of the most widely discussed reform plans. Professors Uwe Reinhardt and Madison Powers cast a critical eye on “efficiency”—in contrast with “equity”—as the chief evaluative criterion for such plans. Dr. Troyen Brennan broadens the discussion of medical reform to include a proposal for complementary tort law reform.

Part III examines some tested foreign and domestic models of change. Robert Evans provides an insider's view of the Canadian experiment with national health care. Former Massachusetts Governor Michael Dukakis shares the experiences of Hawaii and Massachusetts with employer-based insurance

programs. Michael Garland describes the controversial Oregon plan for reforming medical care.

Part IV looks at the issue of “granny dumping”—just one example of how fear of unaffordable care forces many of us to make drastic, and even tragic, choices. The ultimate success of whatever reform option we choose will depend on whether we succeed in alleviating (if not eliminating) systemic problems like granny dumping.

Linda D. Rottenberg
Editor-in-chief