

## Editor's Note

Over the past thirty-two years, the *Journal of Health Politics, Policy and Law* has served as the intellectual home for political scientists and others interested in the politics of health care. During this time, each of the six former editors has maintained that core mission while simultaneously taking the journal in slightly different directions. This special issue of the journal serves as yet another transition point, as I assume the role of editor. In this editorial note, I review the journal's recent path as well as summarize my own plans and goals. I also mention why a special issue on Medicare seems like the right way to start my tenure here and to offer an overview of what has turned out to be an extraordinarily interesting and provocative set of articles.

### Looking Back

*JHPPL*'s very first issue (in spring 1976) included a position paper on national health insurance by Senator Jacob Javits, an article titled "The Politics of Medical Inflation" by Ted Marmor and colleagues, and a report from Washington by Steven Strickland, which summarized the goings-on in the world of federal health policy. The next issue included a guest editorial by the president of Blue Cross of North Carolina, an article titled the "Challenge of Comparative Health Policy for Political Science," and another report from Washington. The stage was set: *JHPPL* would be the journal that combined thoughtful political analysis with lively debate and discussion.

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Over the years, however, it became difficult to maintain the mix of social science research and timely political commentary, especially given the small circle of political scientists who study health politics and the even smaller circle of policy makers and policy analysts that could (or would) submit to an academic journal with a relatively small readership.

Given these trends, the journal shifted its focus, beginning an effort to attract submissions from a wider group of social scientists, including economists and health services researchers, and scaling back the effort to include commentaries about current controversies in health policy.

Upon becoming editor in 2003, Mark Schlesinger accelerated the effort to attract scholars from a wide array of disciplines, partly in response to the ahistorical and parochial nature of much health policy literature; partly because, having spent nine years as an associate editor, he knew there were too few political scientists writing about health care to fill six issues; and partly because he viewed the eclectic nature of the journal as a strength. To aid in this effort, Mark increased the number of associate editors and asked them to provide outreach to their respective intellectual communities.

Under Mark's leadership, the journal has published many superb articles from a range of social science perspectives. Mark also wrote thoughtful introductory essays—always aided by a cartoon and often helped by an image of a pizza—that tied together the articles in a particular issue.

### Looking Ahead

I hope to move the journal in a slightly different direction, pushing a bit harder toward the earlier niche in political science and contemporary policy debate.

For reasons I have never fully understood, relatively few political scientists study the politics of health care. This is not a new development. Indeed, the pioneering members of the Committee on Health Politics (COHP) began this journal precisely because there were no other venues that valued the systematic inquiry into the politics of health care. This marginalization within the academy continues today. Indeed, the COHP remains too small to qualify as an organized section within the American Political Science Association (despite a recent and valiant effort to gather the needed two hundred signatures).

I am not naive enough to think that large numbers of mainstream political scientists will study health politics anytime soon. Nor am I interested in publishing much of what passes for political science these days. Nonethe-

less, it is unfortunate that few students of politics consider some or all of the extraordinarily interesting and important range of health policy issues that are part of the political landscape. Without overstating the importance of the contributions we could make, it does seem that political scientists (like economists) ought to be an important part of the national dialogue on health policy. I am anxious to encourage small steps in that direction. Why? Because good health policy requires more than good ideas; it requires an understanding of the institutions of government. When and why do presidents take the health policy lead? Why do regulators quietly shift policy directions? What explains the occasional legislative leadership (and the more common legislative inertia)? When do the courts shape policy? On what types of issues? When do states take the lead? Do states actually act as policy laboratories? How do different institutional venues shape policy outcomes? How does political culture shape policy outcomes? What about interest groups and prior programmatic history? How are such institutional and cultural legacies enriched by cross-national insights? What lessons are suggested for reformers? How do we turn good ideas into good policy? These are the questions that ought to animate the pages of *JHPPL*.

### Saying Thanks

For more than a dozen years, Mark Schlesinger has played a key role in shaping and administering the journal, first as an associate editor under Mark Peterson and more recently as the journal's editor-in-chief. During his tenure, Mark has become a mentor to a generation of health policy scholars, providing detailed and insightful comments, even when sadly informing authors that their submissions were not suited to the journal. His success as a mentor is due to three things: remarkable knowledge about a dizzying array of subjects, a deep commitment to intellectual rigor, and an extraordinary willingness to spend lots of time reviewing and thinking about the works submitted to the journal. His editorial voice will sorely be missed (although his scholarly work will remain an important part of the journal, as illustrated by the article he cowrote with Jacob Hacker for this issue).

Mark was the first to admit, however, that the task of running the journal on a day-to-day basis fell largely to the former managing editor, Tory Bilski. Tory was also extremely helpful to me during the transition period, for which I am very grateful.

### **The New Team**

There are two new names that will be important to any potential contributor to the journal. Thom Blaylock is now the assistant editor, processing new submissions, helping me find peer reviewers, and guiding articles through the peer review process. Thom is also a writer, with a nearly complete novel (having nothing to do with the health care system). Over time, however, I expect him to write the great American health care novel.

Anne Enenbach Gering is the new managing editor. She will copyedit articles accepted for publication, work with authors on final changes, and shepherd each issue through the production process. She is organized, efficient, and easy to work with. We are lucky to have her.

David Frankford, Sherry Glied, Jon Oberlander, and Harold Pollock have stayed on as associate editors. Colleen Grogan remains as book review editor, and Chris Conover continues on as news and notes editor. I am grateful to them all.

### **Starting with Medicare**

The political battle over the future of Medicare will have an extraordinary impact on the American health care system. In an effort to set the tone for the discussion and debate I hope to see in the journal, I have asked several of the nation's leading Medicare experts to write about this political story.

The issue begins with Larry Jacobs's masterful effort to review the program's historic roots as a political strategy (incrementalism) on the path toward national health insurance—a strategy, he argues, that is equally relevant today. Jon Oberlander then examines the lessons and the legacies of the Medicare Prescription Drug, Improvement, and Modernization Act (MMA), pointing out similarities between that law and the original Medicare legislation as well as ways in which the new law might usher in a dramatic program transformation. Joe White, Mark Schlesinger and Jacob Hacker, and John Cawley and Andrew Whitford then offer three very different perspectives on how Medicare should move forward in a political environment that emphasizes health care competition. White suggests that government should allow large self-insured firms to rent the Medicare provider network, claims-servicing infrastructure, and payment systems, thereby letting Medicare compete with private insurers on terrain on which it is relatively strong. Schlesinger and Hacker argue that the “new” Medicare, with its more competitive mix of public and private coverage,

is actually (and surprisingly) a promising first step toward national health insurance. John Cawley and Andrew Whitford review the actual implementation of competitive bidding under the MMA and point out ways in which the competition falls short and how it can be revitalized.

In addition to these five provocative articles, there are two shorter commentaries and two book reviews. Ted Marmor offers a critique of the various articles, and Katharina Janus and Larry Brown evaluate the movement within Medicare toward pay-for-performance. Finally, there are reviews of two recent Medicare books: Jon Oberlander reviews *Medicare* by Marilyn Moon, and Robert Hudson reviews *Medicare Matters* by Christine Cassell.

### **Our Goal**

The first issue of the journal, back in spring 1976, contained a short editorial note from Ralph Straetz, in which he noted, “If we succeed, it will be because our constituency can articulate with force and clarity the major and vital health issues of our time in order to enlighten the path to our ultimate goal: decent health care for the suffering.” Thirty years later, the problems of the health care system seem more intractable, and the goal articulated by Straetz seems more out of reach. It may also seem naive to suggest that our journal and our community can do much to ensure a society that provides decent health care for the suffering. *JHPPL* is one forum, however, for students of health politics to explain how we ended up where we are and how we might do better.

Enjoy the articles, commentaries, and reviews. Send me a note with ideas on how to keep the journal lively and topical. Submit an article. Be a part of the *JHPPL* community.

Michael S. Sparer

