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Everyone requires health care at some point during his or her lifetime, and the law increasingly regulates the cost, quality, and access to such health care. Through the 2001 Goodwin Seminar, Nova Southeastern University's Shepard Broad Law Center examined health care in the twenty-first century by adopting an interdisciplinary approach, focusing on concerns about cost, quality, and access as the linchpins of health care policy, and considering the future of health care in the United States and internationally. I am proud to have created and taught the seminar, memorialized in this special issue of the *Nova Law Review.*

The seminar's focus on health care policy was particularly timely during the Winter term of 2001 and continues to be timely as this issue appears. As the seminar proceeded, the news media reported debates about the use of human embryonic stem cells in medical research,[1] an issue raising continuing moral, ethical, legal, and medical quandaries.[2] Reports of numerous incidences of medical error had recently surfaced,[3] leaving one to wonder and to continue wondering, about the basic level of problems that remain in the health care system, even as medical advances magnify the level of sophistication and expertise Americans expect in health care. As Americans hear of and expect to receive more and more technologically advanced medical treatment, policymakers struggle to facilitate appropriate access to

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1. *See, e.g., Washington in Brief*, WASH. POST, Mar. 7, 2001, at A4.

2. *Compare* Elliott Abrams et al., *On Human Embryos and Medical Research: An Appeal for Ethically Responsible Science and Public Policy*, 16 ISSUES L. & MED. 261 (2001) (arguing against human embryonic stem cell research on moral grounds), *with* Ronald M. Green, *Stopping Embryo Research*, 9 HEALTH MATRIX 235, 252 (1999) (terming opposition to human embryonic research "research obstruction").

3. Comm. on Quality of Health Care in Am., Inst. of Med., *To Err is Human: Building a Safer Health System* (L.T. Kohn et al. eds., 1999).

such treatment, control costs, and assure quality of treatment.[4] The decisions of those policymakers affect not only the United States but also the international medical community, for legal decisions governing health care policy in the United States can and do affect access to medicines and medical care in other countries.[5]

In this issue of the *Nova Law Review*, the reader will find articles by four distinguished visiting professors, each addressing issues arising within his or her special sphere of expertise within the larger topic of health care policy. Ranging from a former secretary of the Department of Health and Human Services, to an epidemiologist with an international human rights organization, a former presidential advisor, and an expert in bioethics, these authors permit the reader to explore the full realm of policy issues confounding those attempting to improve health care.

For example, the Honorable Louis W. Sullivan, M.D. served as Secretary of Health and Human Services from March 10, 1989 through the end of President George H.W. Bush's administration. Now president of Morehouse School of Medicine in Atlanta, Dr. Sullivan writes about health disparities in the United States,[6] explaining that there exists severe and continuing disparities in the level of health care provided to and the health enjoyed by minorities as compared with Caucasians.

In 1993, hoping to resolve some of those health disparities as well as to equalize access to health care and coverage across the United States, President Bill Clinton proposed a comprehensive National Health Security Plan in an attempt to restructure the health care system.[7] Goodwin Distinguished Visiting Professor, Christopher C. Jennings, served as Senior Health Policy

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4. *See generally* Peter D. Jacobson, *Regulating Health Care: From Self-Regulation to Self-Regulation?*, 26 J. HEALTH POL., POL'Y & L. 1165 (2001) (part of a special issue discussing health care policy since and in light of the influential article, Kenneth J. Arrow, *Uncertainty and the Welfare Economics of Medical Care*, 53 AM. ECON. REV. 941 (1963)).

5. One example is the extent to which patent laws protect brand-name drugs. The availability of generic drugs greatly affects the prices manufacturers of brand-name drugs can charge for their products in both the United States and other countries. *See generally* S. Van McCrary & Cheryl J.C. Erwin, *Thinking Globally About Biotech Ethics: Is the Law Enough?*, 666 PRAC. L. INST./PAT. 983, 1008–09 (2001) (noting this struggle relating to availability of AIDS drugs in developing countries). Recent inroads on patent protections have encouraged generic drug makers in their economic battle against brand-name drug manufacturers. *See, e.g.*, Glenn Singer, *Makers of Generics Get Boosts in Courts, Capitol*, SUN-SENTINEL (Ft. Lauderdale), Jan. 15, 2002, at D1.

6. Louis W. Sullivan, *A Conversation with Dr. Louis Sullivan*, 26 NOVA L. REV. 467 (2002).

7. *See* THE PRESIDENT'S HEALTH SECURITY PLAN (1993).

Advisor and Deputy Assistant to the President under President Clinton. As such, working out of the President's Domestic Policy Council and in conjunction with the National Economic Council, Mr. Jennings was charged with developing the Administration's health care policy and played a lead role in the drama surrounding the President's proposal and its subsequent failure in Congress. Here, Mr. Jennings, from the perspective of someone who has tried but whose efforts fell prey to the political process, discusses steps that must be taken and issues that must be addressed to improve the American health system.[8]

Many of the steps the United States may choose to take are governed, not only by economic and political considerations, but also by moral and ethical judgments. Medical research on human tissue, for example, holds great promise for bettering the health care system by leading to cures or treatments for a variety of diseases. Yet, the question arises as to how the law should regulate such research, especially in light of ethical and moral questions surrounding its use. R. Alta Charo is Professor of Law and Medical Ethics at the University of Wisconsin at Madison, where she is on the faculty of the Law School and the Medical School's Program in Medical Ethics. A former member of President Clinton's National Bioethics Advisory Commission, Professor Charo has considered the role that ethical and moral judgments play in health care policymaking. Her essay addresses legal issues arising from the use of human tissue and concludes that "[a] more robust form of national control over the market in human tissue . . . will probably depend upon resolution of political and legal views of the body."[9]

Finally, the United States should not forget that, given today's global economy, any decisions made with regard to health care policy inevitably will affect other nations in some way. United States regulation of the production of pharmaceuticals, for example, often impacts the drugs that are available and the prices at which they are available in other countries. Anne-Valerie Kaninda, M.D., a medical advisor and epidemiologist with Doctors Without Borders/Médecins Sans Frontières, writes of the interrelationship between pharmaceutical production, its regulation, intellectual property

8. Christopher C. Jennings, *A Conversation with Christopher C. Jennings*, 26 NOVA L. REV. 403 (2002).

9. R. Alta Charo, *Skin and Bones: Post-Mortem Markets in Human Tissue*, 26 NOVA L. REV. 421, 450 (2002). *See generally* Henry T. Greely, *Breaking the Stalemate: A Prospective Regulatory Framework for Unforeseen Research Uses of Human Tissue Samples and Health Information*, 34 WAKE FOREST L. REV. 737 (1999).

rights, pricing, and the availability of certain drugs in developing countries.[10] Dr. Kaninda's appearance at Nova Southeastern University was important, not simply because of her distinguished career, but also because of the esteem with which others regard her employer. Doctors Without Borders/ Médecins Sans Frontières received the Nobel Peace Prize in 1999 for its work in sending more than 2000 medical workers to provide care in nearly ninety countries.

In addition to the articles from these distinguished visiting professors, this issue of the *Nova Law Review* contains student articles on medical-legal topics. Some of the students whose articles appear here—specifically, Daniel Cohen, Judith Goodman, Jesse Lieberman and Stacy Warman—were students in the Goodwin Seminar and benefited in their research and writing from interaction with the Goodwin professors. Another, Sandy Martin, has joined the *Law Review* since the Goodwin Seminar but undoubtedly also has profited from the medical-legal knowledge *Law Review* editors gained through the seminar. For all this, the NSU Law Center, and I in particular, owe a special debt of gratitude to the Leo Goodwin Foundation, Inc. for its generous support of the Goodwin Seminar and the Goodwin Chair in Law.

Finally, the reader should know that the seminar's health care theme reflects the NSU Law Center's commitment to its health law curriculum and programs. The NSU Law Center offers a health law concentration, providing law students the opportunity to specialize in either transactional or litigation-related health law studies. In July 2001, it also began offering an online master's degree in health law for non-lawyers, the first such program to be offered by an ABA-accredited law school. Through the latter program, the NSU Law Center intends to both help improve the health care system and honor the American Bar Association's suggestion that law schools educate non-lawyers about the law.[11]

All of these efforts are linked. As the United States struggles with the form of its health care system, and as the choices it makes during that struggle affect patient care, health care professionals, lawyers and the public, all must become more conversant with health care policy issues. Legal decisions affecting health care cost, quality, and access in the new millennium will determine the sort of care patients receive, not just here in United States but also worldwide. This issue of the *Nova Law Review*, the 2001 Goodwin

10. Anne-Valerie Kaninda, M.D., *A Conversation with Dr. Anne-Valerie Kaninda*, 26 NOVA L. REV. 451 (2002).

11. *See* Philip S. Anderson, *Learning to Educate the Public*, A.B.A. J., July 1999, at 6.

Seminar, and the NSU Law Center's commitment to health law education will help prepare both health care lawyers and members of the health care industry to participate in decision making with regard to this important subject.