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## From the Editor

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The surprise election of Pennsylvania's Harris Wofford to a seat in the United States Senate resonated with those interests, private and public, that advocate broad-scale reform of America's health-care system. Wofford, a Democrat who overcame a forty-point disadvantage in opinion polls to upset Republican Richard Thornburgh, made a call for national health insurance a centerpiece of his successful campaign. Thornburgh, President Bush's former attorney general, sought during the campaign to discredit Wofford's call for national health insurance. A postelection survey of voters conducted for The Henry J. Kaiser Family Foundation indicated that Thornburgh misread the electorate on the issue of national health insurance. When Pennsylvania voters were asked to identify the top two issues that influenced their vote for senator, they responded: national health insurance (50 percent), taxes (29 percent), the recession/loss of jobs (21 percent), and issues concerning the candidates' records or reputations (14 percent). Insurance was identified as one of the top two issues more frequently with Wofford voters (64 percent) than with Thornburgh voters (39 percent). During the campaign, Wofford provided no details of his national health plan. To learn voters' preferences in this regard, the Kaiser-sponsored poll, conducted by KRC Communications Research and designed by Robert J. Blendon of the Harvard School of Public Health, asked respondents which of two reform alternatives they preferred. Respondents were equally divided between a plan requiring employers to provide insurance to their employees or pay a tax (35 percent) and an all-government national health plan (32 percent). Seventeen percent preferred the status quo. Another survey sponsored by the Health Insurance Association of America (HIAA) and conducted by Democratic pollster Ed Lazarus and Republican pollster Bill McInturff indicated that Pennsylvania's economy and the need to "shake things up" in Washington were more important to voters there than national health insurance, crime, or drugs. Whatever the results of the two surveys, the question remains: What relevance does Wofford's triumph hold for elevating health

system reform in the coming presidential election and beyond? On the day following Wofford's triumph, President Bush said as he departed for a foreign trip: "Stay tuned, because when we get prepared . . . we will be coming forth with something I think is constructive." House and Senate Republicans were certainly exercised over the results of the Pennsylvania election, expressing a belief that Bush must become energized on the subject and, in the Senate GOP's case, putting forward its own reform prescription. Wofford's election certainly increased the likelihood that whoever is the Democratic presidential nominee in 1992 will recognize that health insurance reform resonates with many of its party's voters and also has the potential of attracting independent voters. But in my view, it's stretching credulity to anticipate that the 1992 election will be anything other than a referendum on the economic and foreign policies of George Bush. National health insurance may weigh in as a second-order issue, but it seems a long shot to definitively tip the scales of the presidential election. Nevertheless, broad-scale reform is an emerging issue, and, sooner or later, the federal government will have to step up to the policy plate to address it. This thematic issue of *Health Affairs* is devoted to papers that discuss health insurance reform, the insurance underwriting cycle, and the potential of managed care to redirect the dominant U.S. system of providing medical care. In this, our second thematic volume on managed care (the first being Summer 1988), we commissioned leading authorities to address the most important managed care issues and subjected their papers to external peer review. In addition, we asked Victor Fuchs to revisit an essay he wrote fifteen years ago, entitled "From Bismarck to Woodcock: The 'Irrational' Pursuit of National Health Insurance." In the period since our 1988 thematic issue, which included a paper by Alain C. Enthoven entitled, "Managed Competition: An Agenda for Action," his proposal has become a favored reform approach of a variety of publications and political organizations, including *Business Week* ("A Prescription for Reform," 7 October 1991), *The New York Times* ("A Plausible Revolution in Health," 29 October 1991), and the Senate Republican Task Force on Health Care. While a definition of what constitutes managed care remains elusive, at least knowledgeable observers recognize that it can be a viable delivery concept only if patients, payers, and providers alike embrace the principles upon which it is based. We acknowledge, with gratitude, the assistance provided by HIAA to publish this thematic issue and the willingness of its members to support Project HOPE's journal without directing its content.

*John K. Iglehart, Editor*