The Annals of Health Law is proud to present the Eighth Issue of our online counterpart, Advance Directive. Consistent with our goal of promoting student scholarship in the area of health law, this Issue features articles that explore various aspects of health systems around the world. Every country addresses health care differently, and our authors discuss what the United States can learn from international approaches.

The Issue begins with a look at two developed nations with universal health coverage: Switzerland and France. First, we examine how the Swiss successfully implemented an individual mandate and what lessons the U.S. can learn while implementing its own individual mandate set forth in the Patient Protection and Affordable Care Act. Second, our authors analyze the strengths and weaknesses of France’s universal health care system, which is considered one of the best in the world.

The Issue then continues with an analysis of how Australia has maintained highly efficient and quality care under its universal health care system, and how the U.S. can emulate these methods to achieve quality care while increasing access. We then discuss how the U.S. can lower costs and improve quality of care for those with chronic conditions by taking lessons from Chile. Then, our authors examine the fee schedule used in Japan and argue that the adoption of a fee schedule in the U.S. could equalize care across populations while lowering costs.

Next, our authors explore the role of primary care in health systems. First, we examine Spain’s extensive and strategic delivery of primary care; focusing on what lessons the U.S. can learn in reforming community health centers. Second, our authors analyze Denmark’s emphasis on combining primary care with Health Information Technology and discuss how the U.S. Patient Centered Medical Home model may adopt similar practices. Third, we investigate the United Kingdom and Scandinavian countries to discuss the advantages and challenges of implementing Electronic Health Records in the U.S. and what is necessary for such systems to succeed.
The Issue transitions into discussing the transformation of Turkey’s pharmaceutical industry through patent reform and regulation of clinical trial procedures. Then, our authors argue that using the Chinese essential medicine list as a template to reform the current system in the U.S. could help to contain rising costs and increase access to necessary medicine.

The Issue then delves into regional disparities in health care. We first examine the disparities in care caused by Italy’s regionally divided system and whether the U.S. can equalize care across all areas. Our authors advocate for a state level National Solidarity Fund, similar to the one in Italy, to evenly distribute resources and equalize quality of care. Second, we examine the effectiveness of the U.S. Medicaid Federal Medical Assistance Percentage (FMAP) compared to Canada’s equalization transfers based on a representative tax system (RTS). Our authors argue that remodeling the FMAP after the RTS system will equalize care and better allocate funds. Next, we address Canada’s convoluted process of administrative claims for reimbursement and demonstrate that governments may be ill equipped to make coverage decisions.

The Issue then addresses how the U.S. can better serve specific populations of people. We investigate Norway’s innovative Dementia Plan 2015 and speak to how the U.S. National Alzheimer’s Project Act can embrace Norway’s systemic changes to better care for the aging population. Our authors then provide a thorough analysis of China’s regulation of sex-selective abortion; along with laws and regulations the U.S. has implemented to address this issue.

Lastly, the Issue provides an overview of the no-fault medical malpractice system employed in New Zealand and whether a similar system would work in the U.S. Our authors conclude that while possible, a no-fault system in the U.S. would present many challenges.

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We hope you enjoy our Eighth Issue of Advance Directive.

Sincerely,

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Advance Directive Editor
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