

# TABLE OF CONTENTS

Acknowledgements	ix
Abbreviations	xi
Table of Cases	xiii
<b>Chapter 1: Introduction</b>	<b>1</b>
1. The health care system	1
2. Law, law-making and policy	2
3. The formulation of the problem, structure, methodology and limitations	3
<b>PART ONE</b>	
<b>GENERALISING A THEORETICAL MODEL OF HEALTH CARE LAW-MAKING</b>	<b>13</b>
<b>Chapter 2: A model of law-making</b>	<b>15</b>
1 Introduction	15
2 Legal-theoretical backgrounds: characteristics of the law-making doctrine	17
2.1 Rationality of law-making	19
2.2 The normative and functional aspects of law-making	19
3 Methods of law-making	25
3.1 Noll's method of law-making	26
3.2 Wróblewski's method of law-making	35
4 Analogies Noll and Wróblewski	39
5 Adaptation of Noll's law-making model	43
6 Conclusions	53
<b>Chapter 3: A normative framework of health care law</b>	<b>55</b>
1 Introduction	55
2 Principles of health care law	56
2.1 Social versus individual rights	58
2.2 The right to health care	62
2.3 Patient autonomy	66
3 Functions of health care law	71
3.1 Historical backgrounds and its legal setting	72
3.2 Roemer's functions of health care law	76
3.3 World Health Organization: Strengthening ministries of health	78



3.4	Furrow: Four concerns of health care law	80
3.5	Montgomery: Exposition of obligations	81
3.6	Longley: Llewellyn's theory of law-jobs applied to health care	81
4	Principles of health care law in international law	83
4.1	The right to health care in international treaties	83
4.2	Patient autonomy in multilateral declarations and agreements	95
5	Conclusions	102

<b>Chapter 4: Synthesis of a circular model of health care law-making: Relevance to Central-Eastern Europe</b>		105
1	Introduction	105
2	A conceptual model of health care law-making	106
3	Relevance to central and eastern european health care reforms	113
4	Conclusions	125

## PART TWO

<b>THE RELEVANCE OF THE LAW-MAKING MODEL IN CENTRAL-EASTERN EUROPE: A THREE COUNTRY ANALYSIS</b>	127
--------------------------------------------------------------------------------------------------	-----

General introduction	129
----------------------	-----

<b>Chapter 5: Health legislation in Hungary</b>		131
1	Introduction	131
2	Sources of health law	131
2.1	Historical background	131
2.2	A constitutional right to health care	134
2.3	Public health	136
2.4	The organisation and planning of health care services	139
2.5	Health care financing	145
2.6	Patients' rights	149
3	Patterns in legislative reforms	154
4	Deficiencies in the law-making practise	159
5	Conclusions	163

<b>Chapter 6: Health care legislation in the Czech Republic</b>		165
1	Introduction	165
2	Sources of health law	165
2.1	Historical background	165
2.2	A constitutional right to health care	167



2.3	Public health	171
2.4	Organisation and planning of health services	174
2.5	Health care financing	178
2.6	Patients' rights	181
3	Patterns in legislative reforms	184
4	Deficiencies in the law-making practise	192
5	Conclusions	194

**Chapter 7: Health care legislation in Poland** 197

1	Introduction	197
2	Sources of health law	197
2.1	Historical background	197
2.2	A constitutional right to health care	199
2.3	Public health	203
2.4	Organisation and planning of health services	206
2.5	Health care financing	208
2.6	Patients' rights	212
3	Patterns in legislative reforms	216
4	Deficiencies in the law-making practise	224
5	Conclusions	227

**PART THREE**

**THE RELEVANCE OF THE ANALYTICAL MODEL IN  
TRANSPOSING EC LAW** 231

General introduction	233
----------------------	-----

**Chapter 8: The relevance of the analytical model to EC law  
approximation** 235

1	Introduction	235
2	Rationalizing the law approximation process	236
3	Paving the way towards accession	245
4	Impact of EU accession to national health legislation	255
5	Law approximation experiences	283
6	Conclusions	295

**Chapter 9: Final conclusions** 299

References and Bibliography	317
-----------------------------	-----

Samenvatting	339
--------------	-----



Zusammenfassung	349
Index of Authors	359
Index of Subjects	363