NCSBN
Leadership And Public Policy Conference

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Political Feasibility Analysis:

Winning Strategies in Public Policy

Winning in the End Game
"POWER OF AN IDEA"

Winning in the End Game
Political Feasibility Analysis Model

It’s...an art form,

not a science.
Winning in the Endgame

Philosophical question:

It's not whether you win or lose. It's how you play the game?
Grantland Rice

I have never had much sympathy for that point of view.
Richard Nixon

Winning isn't the only thing; it's everything
Vince Lombardi
Key Perspectives

- Non-partisan
- Not a debate on the merits of a policy
- It’s about winning
Outcomes from Presentation

• New perspective for changing public policy

• Adept at assessing feasibility to foster social change
  • Policy analysis, research and data to be persuasive

• Equipped to “Make A Difference”
Political Feasibility Model Overview
Assessing Your Feasibility of Winning

Opportunity
- Social change/public good
- Credibility enhancement
  - Financial gain
  - Expanding base

Power Base
- Policy domain access and control
- Direct and indirect policy makers
- Finance/organization strength
  - Grassroots or “bully pulpit”
- Social media and traditional media

Risk
- Loss of credibility/funding
- Opposition strength
- Issue survival
- Losing base

Public Policy Issue

Political Environment
- Bi-partisan
- Polarizing
- Public opinion

Public Policy Strategies

Inclusionary Strategies
- Consultation
- Compromise
- Coalitions

Persuasive Strategies
- Policy analysis
- Protest
- Rhetoric

Exclusionary Strategies
- Secrecy
- Bypass
- Deception

Historical Timing
- Precedents—Legislative/Legal
- Lessons learned
- Why now?
Define Policy Issue:
Conduct Feasibility Analysis Assessment
(Power Base, Risks and Opps, Political Environment, Historical Precedents)

Action/Decision
(No Go!, Incremental, or Comprehensive)

Develop Strategic Approach
(Persuasive, Inclusionary & Exclusionary)

“War Room”
(Continuously monitor feasibility, prepare to shift strategies, maintain an exit strategy)

WIN!!!
Key Principles in Understanding the Feasibility Model

- Power base stable & growing...NOT eroding
- Adept at changing strategies with shifts in political environment
- Continually evaluate risk vs. opportunity
- Media & communications efforts support policy strategies
- Be prepared to “redefine the issue” if out flanked
  - Avoid coalition & alliance break down
    - Utilize social media-24/7 game!
  - Leadership erosion-crisis of confidence
    - Always have an “Exit Strategy”
- Leadership and “The War Room”-Continuous Oversight!
What is the policy or idea?

- Clearly define the issue, who cares and why?
- What is the solution and who are the decision makers?
- Who cares about the issue and who supports change?
- Why motivates you to get involved to bring about change?
  - Be the leader to “Make a Difference”
Political Feasibility Analysis Model

POWER OF AN IDEA
- Policy Issue & Initiator
  - Power Base
  - Historical Precedent & Timing
  - Risk & Opportunity
- Political Environment

Feasibility Assessment
- Comprehensive
  - Incremental
  - No Go!!!

Action Approach

Policy Strategies
- Persuasive
- Inclusionary
- Exclusionary
- Tactics

WINNING IN THE END GAME
- Decision Maker

“War Room” and “Leadership Oversight”
Power Base

- Access to Direct PolicyMakers
- Money
- Membership
- Communication Savvy
- Political Clout
- Charismatic Leadership
Political Environment

• Bi-partisan

• Polarized

• Public Opinion-stable or shifting
Historical Precedents and Timing

- What’s past is prologue
- Legislative, executive, and judicial precedents
- Strategic & tactical lessons learned
- Timing right for action?
Opportunity

- Social Change/Make a Difference
- Reputation & Credibility Enhancement
- Financial Gain
- Expanding base of support/membership
Risks

• Reputation and credibility loss
• Financial instability
• Opposition: “every action has an…”
• Power base decline
  • Getting fired
  • Issued doomed
Action Strategies

• **Comprehensive**

• **Incremental**

• **No Go!!**
Comprehensive

- Political environment aligned on issue
- Strong power base with money & charismatic leadership
  - Solid coalition
  - Weak opposition
  - Access to key decision makers
  - Public opinion favorable
- Should you strike now!
Incremental

• Political environment-unsable

• Power base weak-low funds & small membership
  • Public opinion split
  • Opposition growing
  • Coalition weak but growing
  • Do we have exit strategy
  • Can we compromise and still win?
No Go!!

• Political environment-very negative!

• No power base- no money, small group, no allies

• Great cause but no public support or awareness

  • Decision makers-problem not a priority!

• Moving forward could doom the cause forever!

• Regroup to build power and fight another day?

  • Is it do or die? Nothing left to lose?
Decision Time:

Can We Win?
Focus on Policy Strategies

• Inclusionary
• Persuasive
• Exclusionary
Inclusionary Strategies

• Consultation

• Compromise

• Coalitions
Example: Left-Right Coalition and “Strange Bedfellows”
What is the policy issue that bring them together?

What do these organizations have in common?
Persuasive Strategies

• Policy analysis, use of research and solid data

• Protest and Demonstrations

• Rhetoric, social media & messaging
Exclusionary Strategies

• By-pass-Chief Executives

• Secrecy-good lobbying techniques

• Deception and lying
Political Feasibility Analysis Model

**POWER OF AN IDEA**

- **Assessment**
  - Political Environment
  - Risk & Opportunity
  - Historical Precedent & Timing
  - Power Base

  **Decision Time**
  - Comprehensive
  - Incremental
  - No Go!!

**Policy Strategies**

- Persuasive
- Inclusionary
- Exclusionary

**Tactics**

**WINNING IN THE END GAME**

- Decision Maker or Makers

**“War Room” and “Leadership Oversight”**

Shifting Strategies Based on Changes in Political Environment & Power Base

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Inside the War Room
Leadership Oversight
The War Room

- Monitoring changes in political environment
  - Avoiding power base erosion
- Shifting policy strategies and conducting opposition research
- Media strategies-ready to re-message
  - Maintaining an exit strategy
- Evaluating risk and opportunity
- Assessing winning in the endgame
Retrospective to Win
Prospectively

Case Study Examinations
Legacy of the Vietnam Veterans Memorial Wall

“Honoring the Warrior and Not the War”
“The willingness with which our young people are likely to serve in any war...shall be directly proportional as to how they perceive veterans of earlier wars are treated and appreciated by our nation.”

George Washington
Public Opinion and the Vietnam War

“You were faithful. Your country was not.

There are no monuments to its heroes, no statues in small town squares and city parks, nor public wreaths, nor memorials.

For plaques and wreath and memorials are reminders. They would make it harder for your country to sink into the amnesia for which it longs.

It wishes to forget and it has forgotten.”

Phil Caputo “A Rumor of War” 1977, reflecting on the loss of his friend Walter Neville Levy.
Vietnam Veterans Memorial

Policy Issue

• Memorial as a catalyst improve policies and programs
• Honor and respect more than 58,000 men & women killed
• Improve health care, VA hospitals, jobs training, etc.
• Honor service to country in future wars so country will not forget
• Support our troops in current war with Iraq & Afghanistan
  • Honor the Warrior and Not The War!
Key Elements to Winning in the Endgame

- **Persuasive strategies:** Educate media, public and politicians with data on killed, wounded and medically challenged, etc.

- **Re-messaging not about the “War’ but about the “Warrior.”**

- **Inclusionary:** Build coalitions with VFW, American Legion, Gold Star Mothers, Corporate, etc.

- **Exclusionary:** Getting insider political clout with Republican and then Democrats to build power base.

- **Exit strategy:** Compromise with the statue! Losing would doom legislation.

- **“War Room”** oversight key with Congress, media, H. Ross Perot, opposition veterans, bureaucracy and others.
Building the Vietnam Veterans Memorial in D.C.
Making Public Policy and Honoring the
“Warrior and the War”

Power Base
- Weak to none
- Volunteers & small group of Vietnam Veterans
- Limited media exposure
- No political support for idea

Political Environment
- Polarizing-hawks vs. doves
- Public opinion-forget about the war
- Politicians-not in D.C.!
- H. Ross Perot-Friend to Foe

Opportunity
- “Band of Brothers”
- Channeling veteran anger
- Bring honor and respect
- “Right thing to do”

Vietnam Memorial Legislation

Risk
- Congressional opposition
- Failure may doom issue
- Further alienation of Vietnam veterans by public and other veterans

Public Policy Strategies
Inclusionary Strategies
- Consultation with Senate/House
- Coalitions—military groups/grassroots
- Compromise in endgame

Persuasive Strategies
- Statistics—58,000+ killed
- Redefined the issue: “Honor the Warrior”
- Restore dignity for service for future wars

Historical Timing
- FDR and MLK memorials languishing
- Major opposition to new memorials on the Mall
Winning in an Era of No New Mandates and the Contract with America:
Building a National Coalition
And Grassroots Campaign
Diabetes Background and Facts

• 30 million Americans suffer from diabetes
• Can lead to catastrophic illnesses such as blindness, amputations, stroke, and heart disease
• Medical and economic cost: $174 billion
• No known way to prevent type 1 diabetes (insulin dependent)
• Diabetes is associated with obesity, physical inactivity, old age and race/ethnicity
• 18% of Medicare beneficiaries have diabetes and account for 32% of Medicare spending
Case Study: Diabetes Prevention & Education

Expansion of Medicare Coverage in era on “No New Mandates”

**Power Base**
- 14,000 members in all 50 states
- 30 million Americans suffer from disease
- Access to direct policy makers at grassroots
- Congressional Diabetes Caucus-bipartisan

**Political Environment**
- “Contract with America”
- No New Mandates
- Speaker Gingrich-initially opposed

**Opportunity**
- Public good
  - Help 30 million Americans
  - Benefit Nurses & Pharmacists
  - Build public awareness
  - Expand membership

**Risk**
- Power of the AMA/Docs
- Organizational loss of members
- Loss of power base
- Leadership changes

**Expand Medicare-Diabetes Education & Prevention**

**Inclusionary**
- Broad based coalition
- Bi-partisan Diabetes Caucus
- All 50 states/grassroots

**Exclusionary**
- Target Speaker

**Persuasive**
- Policy analysis & research
- Personalize issue with Congress
- Diabetes Awareness Day in Congress
- Long term cost savings to govt./CBO

**Historical Precedents**
- Expansion of Medicare coverage difficult/cost
  - AMA & Docs rule

Public Policy Strategies
- 14,000 members in all 50 states
- 30 million Americans suffer from disease
- Access to direct policy makers at grassroots
- Congressional Diabetes Caucus-bipartisan
Policy Objectives:
Education and Prevention

- Increase access
- Support prevention
  - Educate
- Reduce medical costs
- Attain reimbursement
AADE Action Plan

- Hired a public affairs firm to lead national campaign at national meeting in New Orleans

Objectives:
- Development of federal and state legislative strategies
- Increase public awareness about diabetes and diabetes educators
- Bottom line: Change to Medicare reimbursement for Education and Prevention-Federal and State levels
Key Policy Strategies and Tactics

Inclusionary:

- Grassroots Outreach
- Helped establish Congressional Diabetes Caucus
- Conducted Diabetes Awareness Day on Capitol Hill
- Congressional hearings
- Build national coalition with ADA, dietitians, pharmacists, and industry
- Conduct extensive training of members in all 50 states

Persuasive:

- Compelling data on education and prevention.
- CBO savings in out years.

Exclusionary

- Get to Speaker Gingrich. Personalizing the problem. Gain support to Win!
- Gained Speaker as a life long ADVOCATE!
Winning in the Endgame

*Federal changes to Medicare and state laws mandating coverage*

- Gained access to Speaker locally in Georgia
- Personalized diabetes through human interest and celebrities
- Developed model state legislation and state coalition strategy
- Speaker becomes national advocate & AADE “Legislator of the Year” award!
- Bill passes Congress and battle shifts bureaucracy!
- AADE and coalition winning in the endgame!
Health Care Reform in America
Clinton, Obama and Trump
Health Care Reform in America
The Clinton Strategy
Clinton Healthcare Reform

Background

- Clinton elected 43%, Bush 37% and Perot 19%
- Campaign promise to push for comprehensive health care reform
- Major corner stone of Clinton’s first term “American Health Security Act” in 1993
- Demand for “universal coverage”
- Organized national advisory committee on health care
- Hillary Clinton to head effort and not HHS Secretary Shalala
  - Began with bi-partisan support and consultation
- Utilized inclusionary approach to legislative development
- Leveraged the office President publicly to communicate
Gergen’s Perspectives on the Clinton White House

“Perils of a Co-Presidency”
Case Study: Clinton Comprehensive Healthcare Reform: What went wrong?

Power Base
- The White House
- President Clinton “bully pulpit”
- Congressional support initially
- Massive communications campaign

Opportunity
- Fulfilling Campaign Promise
- Social change/social good
- Credibility enhancement
- Expand Democratic base

Risk
- Credibility/GATT, etc.
- Opposition strength—Harry & Louise
- Health care reform doomed

Political Environment
- Bi-partisan initially
- Public opinion—strong support
- Issue shifted to polarizing

Historical Timing
- Roosevelt/Truman failed
- Johnson Medicare
- Political volatile

Public Policy Strategies
- Inclusionary
  - Coalitions-split
  - Consulting-failed
  - No compromise
- Persuasive Strategies
  - Data/research supported reform
  - Issue redefined by opposition “taking away choice”
  - Failed to re-message

- Exclusionary
  - Strategies
    - Secrecy-doomed effort
    - Lack of faith in consultation
    - Perceived as deception

Clinton Healthcare Reform
Health Insurance Association of America

Opposition Reframing the Debate

“Harry & Louise” Ad Campaign

- Taking away choice!

https://www.youtube.com/watch?v=06QZyJY_eec&t=127s
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**Public Policy Strategies**

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Clinton Health Care Reform
What went wrong?

- Bad policy strategies: failure to compromise & oppose any incremental approach
  - Faux consultation and inclusionary strategies
  - Created opposition from the insurance industry HIAA

- Did not counter “Harry & Louise” campaign— underestimated power of public opinion shifting

- Did not build bi-partisan base in House or Senate

- Placing focus on the First Lady Hillary Clinton & not the President-power base erosion

- Alienating Clinton team with Sec. of HHS & Sec. Treasury Bentsen—could have worked out deal with Congress

- Ignoring Congressional leadership like Sen. Mitchell calling for incremental approach
  - Speaker Gingrich—lose GATT or withdraw health care bill

- No compromise—doomed the issue & created anti-govt. sentiment
  - Losing the Endgame!
Obama Health Care Reform: “Affordable Care Act”
“Making It- How Chicago Shaped Obama”
Insights on Obama’s Leadership & Decision Making Process
The Political Environment

President Obama's Approval Rating

- Approval
- Disapprove
Democrats not unified

Three Democratic Parties

• Liberals
• Leadership
• Moderates
Fiscal Challenge

- Federal Budget Deficit Reduction
- Entitlement Reform
- Health Care Reform
BIG GULP
ECONOMIC STIMULUS

“After this, I’m going to exercise, eat right, cut back on expenses, and save...”
Strategy: Work in Coalition

- Over 100 organizations helped build the reform framework
- Associations partners
- Health reform dialogue

Organizations endorsing this document include:

- AARP
- Advanced Medical Technology Association
- America's Health Insurance Plans
- American Cancer Society Cancer Action Network
- American College of Physicians
- American Hospital Association
- American Medical Association
- American Nurses Association
- American Public Health Association
- Blue Cross and Blue Shield Association
- Business Roundtable
- Catholic Health Association of the United States
- Families USA
- Federation of American Hospitals
- Healthcare Leadership Council
- National Federation of Independent Business
- Pharmaceutical Research and Manufacturers of America
- U.S. Chamber of Commerce
Health Reform Dialogue

Steering Committee

Other Partners
The America I know and love is not one in which my parents or my baby with Down Syndrome will have to stand in front of Obama’s “death panel” so his bureaucrats can decide, ....such a system is downright evil.

--Sarah Palin
Obama Administration
Revives
“Harry & Louise”

Now in support of Health Care Reform!
Obama’s Communications Dilemma

Importance of messaging, use of rhetoric and impact on public opinion!

“Affordable Care Act”

vs.

“Obamacare”
“That would be the Chicago approach to governing: Strong-arm it through...you’re talking about the exact opposite of bipartisan. You’re talking about running over the minority, putting them in cement and throwing them in the Chicago river.”

Senator Judd Gregg (R-NH)
Ranking Minority Member
Committee on the Budget
Bipartisanship: Historical Precedents

1935
House: 372-33
Senate: 77-6

1965
House: 307-116
Senate: 70-24
Key Strategy for Obama to Win in the Endgame
Get the Votes!

Stupak-Pitts House Amendment
Anti-Abortion Provision

- House Conservative Democrats will oppose Obama reform if anti-abortion provision not included—charge lead by Cong. Stupak, Dem. of Michigan & Republican Cong. Pitts.

- Passes House in historic vote. Speaker and others support provision to get conservative Democratic votes.
  - However provision dropped in Senate Bill.

- House Conservative Dems. revolt. Felt betrayed. Right-wing up in arms at Stupak.

- Obama invites Stupak to WH—will issue Ex. Order opposing abortion funding.
  - Stupak supports final bill in House from Senate.
  - Stupak retires from office.
Obama Health Care Reform: The Final Vote

Senate 56-43

House 219-212*

Lack of bipartisanship

(*Passage of a bill in the House requires a majority vote of 218 members of the 435 total in Congress. Four members did not vote on the health care reform bill.*)
Obama and Health Care Reform—Winning in the Endgame

**Power Base**
- "Bully pulpit" leveraged grassroots
- Pelosi and Reid leadership
- Pragmatic approach—not ideology

**Political Environment**
- Bi-partisan to polarized
- Economic downturn forced new strategy
- Deficit

**Clinton vs. Obama**

**Opportunity**
- Fulfilling campaign promise
- Historical landmark legislation
- Beating FDR & Clinton

**Risk**
- Reform doomed
- Campaign promise unfilled!
- Lose left Dem. base support

**Public Policy Strategies**
- Inclusionary
  - Consultation & coalitions—failed
  - Compromise
- Persuasive
  - Data and research
  - Countered "Death panels"
  - New "Harry & Louise"
- Exclusionary
  - By-pass opposition
  - Cut deals—abortion/P-H
  - Stupak-Pitts
  - Votes to win

**Historical Lessons**
- Clinton failure
- Do not repeat-compromise
- Leverage bully pulpit
- Cut deals
“We have done more in 30 days to advance the cause of health care reform than the country has done in an entire decade.”

President Barack Obama

February 17, 2009
Winning & Losing in the Endgame

- **Obama**
  - Bipartisan to polarized
  - Pragmatic politics-make deals
  - Compromise
  - Countered “death panels”
  - Bully pulpit-full speed
  - Obamacare vs. ACA
  - Cut last minute deals-Stupak
  - Got the votes-Pelosi/Reid
  - Winning in the endgame

- **Clinton**
  - Bipartisan to polarized
  - No deals-comprehensive
  - No compromises/incremental
  - Failed to redefine “H & L”
  - Bully pulpit-under utilized
  - Hillary’s profile to high
  - Faux consultation & secrecy
  - Never got to floor-GATT-Newt
  - Issue doomed
Clinton and Obama on Health Care Reform
Two Divergent Strategies

- Political environments: Both started with bi-partisan support but became polarized through media, rhetoric and strong opposition.

- Inclusionary & Persuasive: Both started out inclusionary and persuasive on the need for change. Consultation and coalitions used by both.

- Compromise: Clinton had options but held firm for comprehensive reform as the right thing to do. Obama took pragmatic approach and compromised.

- Exclusionary: Obama cutting deals with Stupak et al but not Clinton.

- Historical precedents: Obama had Clinton precedent.

- Communications and messaging: Obama able to maximize the “bully pulpit” while Clinton could not with Hillary leading the health care initiative.

- Getting to the endgame: Obama gets to the endgame and wins!
Leadership—Clinton and Obama

Health Care Reform

- Clinton visionary but centralized power base & F.O.Bs.
- Obama visionary but pragmatic and small inner circle.
- “Chicago Way” vs. “Arkansas Style”.
- Obama cuts deals and leverages power elites to win. Lessons from Chicago way.
- Clinton’s State of Union address further polarized Congress as Gergen referenced to veto anything less than comprehensive reform.
- Obama utilized Congressional leadership Pelosi and Reid.
- “Lack of an inner compass” Gergen on Clinton.
- Clinton ignored Congress-by-passed Committees & misjudged Congress.
Leadership-Clinton and Obama  
Health Care Reform

- Clinton exclusionary to control content-comprehensive or nothing! No Refused compromise or incremental approach offered by Sen. Mitchell.

- Obama sought compromise, leveraged leadership and shifted to exclusionary to get votes-Stupak Amendment, etc.

- Clinton ignored “Harry & Louise” and got out messaged! Under estimated interest groups and impact on public opinion.

- Obama attacked interest groups with new “Harry & Louise” and countered Palin and “Death Panels.”

- Health Care Reform in America: Obama wins in the endgame with passage of historical legislation.
American Health Care Act
Trump’s Failure to Gain Passage
Trumps’ Initial Power Base

- Bully Pulpit

- House Speaker Ryan

- Senator Majority Leader McConnell

- Social media master

- Newly elected-first 100 days

- Core base of voter support
Trump Political Environment

• Polarized from election

• Rise of the resist movement

• Shifts in public opinion with more favorable view of ACA

• Trump approval rating 39% to 45%
Historical Precedents & Timing

• Health care avoided as by all Presidents until Clinton

• Lessons learned Clinton losing

• Lessons learned Obama winning

• Trump cutting new path
Opportunity

• Fulfil a campaign promise

• Victory in 100 days!

• Improving on Obamacare

• Demonstrate leadership and being Presidential
Risks

• Not fulfilling campaign promise
  • Erosion of power base
  • Reputation and credibility loss
• Negative impact on tax reform
• Negative impact on the American people
  • Issued doomed
• Loss of support in the House and Senate
• Negative impact on the next election for Republicans
  • Breakdown of Republican leadership
  • 2018 election losses
Trump Policy Strategies

Inclusionary
• Consultation-some efforts with health care groups but minimal
  • Coalitions-nothing formalized
  • Compromise-minimal or none

Persuasive
• Policy analysis-CBO report negative impact
• Protest & Demonstrations-Resist movement
  • Rhetoric-continued attack on ACA-Repeal and Replace!

Exclusionary
• By-pass
• No consultation
• Secrecy-drafted by Speaker, not White House or Senate
Trump’s Health Care Reform Initiative

American Healthcare Act

Power Base
- Bully Pulpit
- Control of the House & Senate
- Social media following
- Core base of support
- First 100 days-lost

Opportunity
- Fulfil campaign promise
- Improve on Obamacare
- Victory in 100 days!
- Demonstrate leadership
- Being Presidential

Political Environment
- Polarized
- Public opinion shifting
- Resist movement
- Freedom Caucus

Risk
- Power base erosion
- Negative impact on tax reform
- Lack of leadership
- Negative public opinion

Public Policy Strategies
- Inclusionary Strategies
  - Consultation-minimal
  - Compromise-little
  - Coalitions-no
- Persuasive Strategies
  - Policy Analysis-CBO
  - Rhetoric-Repeal & Replace Obamacare!
- Exclusionary Strategies
  - Secrecy-Ryan bill & Senate out
  - Bypass-Freedom caucus and moderates

Historical Timing
- Clinton losing
- Obama winning
- Historically avoided
Trump Losing in the Endgame

• No lessons learned from Clinton and Obama
• No “war room” nor White House leadership
• No real consultation with healthcare industry
  • Miscalculated the Freedom Caucus early, McCain, etc.
• Mistake in “Calling for the vote” and lack of understanding the legislative process
  • No art of the compromise
• Trump attempts as last minute negotiator failed-doomed issue!
Political Feasibility Analysis Model

POWER OF AN IDEA

Policy Issue & Initiator
- Political Environment
- Risk & Opportunity
- Historical Precedent & Timing
- Power Base

Feasibility Assessment

Action Approach
- Comprehensive
- Incremental
- No Go!!!

Policy Strategies
- Persuasive
- Inclusionary
- Exclusionary
- Tactics

WINNING IN THE END GAME

Decision Maker

“War Room” and “Leadership Oversight”
Winning in the Endgame

Define Policy Issue
Feasibility Analysis Assessment
- Power Base
- Risks and Opportunities
- Political Environment
- Historical Precedents

Action/Decision
- Comprehensive
- Incremental
- No Go!

Develop Strategic Approach
- Persuasive
- Inclusionary
- Exclusionary

“War Room”
- Continuously monitoring
- Prepare to shift strategies
- Communications & re-messaging
- Maintain an “exit strategy”

WIN!!!
Major Takeaways from the Feasibility Model

• Power base stable & growing…not eroding

• Knowing when to shifting strategies with a changing political environment

• Continually evaluate risk vs. opportunity

• Media & communications efforts support policy strategies

• Be prepared to “redefine the issue” if out flanked

• Monitor coalitions & avoid alliance break down
Major Takeaways from the Feasibility Model

• Utilize social media and monitor 24/7

• Avoid leadership erosion-crisis of confidence

• Always have an “Exit Strategy”-compromise or withdraw early

• “The War Room”--Continuous Oversight to win in the endgame!

• Believe in the “Power of an Idea”
"POWER OF AN IDEA"

Winning in the End Game