By Michael T. Heaney

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Democrats have lambasted AARP for the move and some of the association's members have resigned in protest. But attacking AARP for supporting Medicare reform is a little like singling out the French for opposing war in Iraq. AARP, like the French, is an obvious rhetorical target, but is hardly isolated or alone.

More than 300 organizations have publicly endorsed the legislation, including health industry associations, medical professionals, patients advocacy organizations, employers, and business trade associations. Much of this support comes from organizations with strong grass-roots networks.

While much media attention has focused on the place of money in politics (hard, soft, malleable, you name it), grass-roots mobilization is an increasingly important card for interest groups to play. Building grassroots support for a position encourages Congress to sit up and take notice because the electoral connection is obvious. If a constituent cares enough to travel to Washington to meet his senator or her staff, they would likely also care enough to work for (or against) the senator in the next election.

In the table accompanying, I report the top 25 most effective grassroots lobbying organizations for health care (based on in-depth interviews with 77 congressional staff). These organizations are highly successful in building connections between their members and Congress on a wide geographic basis. Many

Medicare reform Wash. Times, 11/26/03, p. A15. Both parties vying for support

other organizations have members throughout the United States, but they may not be as effective in making their voices heard in Congress on health issues.

Among these 25 leading organizations, the balance of support leans toward enactment of Medicare reform. prise that hospitals are among the biggest winners in this legislation, which significantly expands payments to rural hospitals and places a moratorium on the creation of specialty hospitals (which are economic threats to general hospitals).

The unions collectively, under

American Hospital Association	.Support
AARP	Support
American Cancer Society	Under Review
National Breast Cancer Coalition	Not Eavorable
Blue Cross and Blue Shield Association	Support
Alzheimer's Association	Support
Juvenile Diabetes Research Foundation International	Under Review
American Heart Association	.Under Review
American Association of Nurse Anesthetists	Support
American Diabetes Association	Support
National Association of Community Health Centers	Support
AFL-CIO	.Oppose
American College of Obstetricians and Gynecologists	.Support
American Nurses Association	.Oppose
National Right to Life Committee	.Support
American Academy of Family Physicians	.Support
American Academy of Pediatrics	.No Position
American Chiropractic Association	Support
United Auto Workers	.Oppose
United States Chamber of Commerce	.Support
Amer. Fed. of State, County, & Municipal Employees	.Oppose
Service Employees International Union	.Oppose
American Physical Therapy Association	.Support
National Association for Home Care and Hospice	No Position
Note: Grass-roots rankings are based on anonymous interviews care staff in the personal offices of members of Congress* Intervie conducted by the author between April and July, 2003.	with 77 health ews were

fourteen organizations are supportive, six are opposed or not positive, three are reviewing the legislation, and two have not announced a formal position.

The American Hospital Association is the health-interested organization with the broadest grassroots base. Every congressional district has a hospital. It should be no surthe umbrella of the AFL-CIO, are offering determined opposition to virtually all aspects of the proposal. The AFL-CIO and its member unions are the only organizations providing significant grass-roots backup to the Democrats on this issue.

While organized labor is a vital force, it seems unlikely that it will be able to go-it-alone for the left. Especially since labor has focused its energies as of late on the prospect of ousting George W. Bush from the White House, a good guess is that it will not be able to mount a maximally effective campaign on multiple fronts.

The most obvious implication of this analysis is that the structure of grass-roots support makes it a safe bet that the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 will become law. A second implication is that the Democrats need to reconsider their general strategy for grassroots mobilization on important legislation. The defection of AARP leaves the Democrats virtually high and dry, with little well-organized backing outside the labor movement. Liberally minded patrons should consider donating to a diverse mix of grassrooted organizations.

A third implication is that the Republicans should be wary of becoming too cozy with AARP. Sen. Chuck Grassley's quip that AARP is the "Good Housekeeping Seal of Approval when it comes to seniors' issues" will come back to haunt him and the Republicans. AARP will return to the Democratic fold before long and, when it does, Republican hyperboles will translate into liberal policies.

A final implication is that AARP has played its cards well over the last week. It has wedged itself effectively between the parties in a way that will make it sought after by both sides. The result will be a more powerful voice for seniors in Washington. This will create an opening for AARP to expand dramatically its already unrivaled citizens network.

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