

The Truth-O-Meter Says:



Democratic U.S. House candidate Julie Lassa pushed for a "Canadian-style government takeover of health care."

[National Republican Congressional Committee](#) on Saturday, October 9th, 2010 in a campaign TV ad

Republican group says Julie Lassa pushed for a Canadian-style health care system in Wisconsin

In the 2010 campaign, many national Democrats have been forced to defend their votes for health care reform. In Wisconsin, the same is true of state-level Democrats, including state Sen. Julie Lassa, who is running for the U.S. House.

At issue: A 2007 vote by state Senate Democrats to include "Healthy Wisconsin," a state-level universal health care program, in their version of the budget.

Lassa voted for the package -- and that vote became key part of a TV ad aired by the National Republican Congressional Committee. Lassa is facing Republican Sean Duffy in a bid for the northwest Wisconsin seat held since 1969 by retiring Democrat Dave Obey.

In [the TV ad](#), the GOP lists a litany of complaints about Lassa's record, including the fact she pushed for a "Canadian-style government takeover of health care." It even labels the plan "LassaCare."

There's no question about the vote. But what about the "Canadian-style takeover" part?

We turned to several experts.

They said the Canadian health system — praised by some, but treated as an expletive of sorts in the ad — includes these key aspects:

- Canada has universal health insurance, meaning everyone is covered.
- It is a single payer system, meaning the government pays the bills.
- Each province negotiates rates and coverage with doctors, hospitals and caregivers.
- The system is funded through income taxes.
- No private insurance is allowed.

Now let's take a look at the Healthy Wisconsin plan, which went nowhere. The Assembly was controlled by Republicans at the time, and even Democratic Gov. Jim Doyle did not sign on.

The plan was an effort to provide health insurance to all eligible Wisconsin residents, so it matches Canada as universal coverage. But it was paid for through a payroll tax on both employers and workers -- not an income tax.

What's more, a variety of private insurance plans would have been offered to state residents. The plan would have resembled the health insurance benefits provided for state employees.

"It's not a single payer plan in any respect," said Thomas R. Oliver, a University of Wisconsin-Madison health policy professor. "The idea was that a number of plans would be available for individuals."

Others agreed.

"This is not Canadian-style health care at all," said Susan Giaimo, a visiting assistant professor of political science at Marquette University who wrote a paper about Healthy Wisconsin, and a book on health care systems in Germany and the United Kingdom.

"Individuals, not employers, would choose their health plan from among a range of plans," she said, adding private insurance plans would have continued, with regulation by the state.

David R. Riemer, an architect of the Healthy Wisconsin plan, told PolitiFact Wisconsin the key difference was who pays the bills. In Canada, the government pays. With Healthy Wisconsin,



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TV ad run by National Republican Congressional Committee against Democratic U.S. House candidate Julie Lassa



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Republican Congressional Campaign Committee [ad](#), "Julie Lassa is the problem," Oct. 9, 2010

Wisconsin Policy Research Institute report. [Will Healthy Wisconsin Bust the State Budget?](#) July 19, 2008

Milwaukee Journal Sentinel, [Democrats advance state budget](#), June 27, 2007

Milwaukee Journal Sentinel, [\\$15.2 billion plan for universal health care kindles support, ire](#), June 26, 2007

Wisconsin State Legislature, [Senate Bill 40](#).

Michael Tanner, Cato Institute, [testimony](#) before the state Legislature. Oct. 2, 2007

Interview, Susan Giaimo, visiting assistant professor of political science, Marquette University, Oct. 29, 2010

Interview, Thomas R. Oliver, professor of Population Health Sciences, School of Medicine and Public Health, University of Wisconsin-Madison, Oct. 29, 2010

Telephone message, David R. Riemer, director of policy and planning at Community Advocates and director of the Public Policy Institute. Oct. 28, 2010

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insurance companies would have paid.

At the time Healthy Wisconsin was being debated, there was sharp disagreement about how far-reaching the proposal was.

A [report](#) by the Wisconsin Policy Research Institute, a conservative-leaning group, declared: "Healthy Wisconsin would turn every aspect of the health care system over to state government."

The report noted "cost containment" was an aspect of the plan, and said other countries with a single-payer system have rationed the use of "high-cost new technology."

In [testimony](#) before a state Senate committee, Michael Tanner, an official with the Cato Institute, a libertarian group, said the plan "combines many aspects of a single-payer health care system with the central structure of a concept known as 'managed competition.'"

This, he said, would almost inevitably reduce the availability of and access to care, and lead to a reduction in capital spending on health care.

Both opponents used problems with the Canadian system to warn against the perils of government involvement in health care. But they did not say Healthy Wisconsin resembled a move to that country's system of health care.

So, let's return to the GOP claim against Lassa.

Did Lassa and Senate Democrats push a plan that a Canadian would recognize? Hardly. The differences are many: Who pays, how the plan is funded, insurance choices for consumers. Broad strokes are often used in political attacks, and in some cases those making them paint outside the lines. In this case, the lines got painted over.

We rate the claim False.

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