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Red tape fever

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The police department doesn't make you prove that your taxes are paid before they respond to your alarm. The fire department won't expect you to enter your PIN code after you call 911.

So why should Utah's Medicaid and Children's Health Insurance Program throw unnecessarily high barriers in front of the families the programs were created to serve?

Yes, Medicaid and CHIP are meant for low-income households. To fulfill their mission, and to have any hope of having enough money to go around, managers of those programs must verify that the people on their rolls really meet the standards. Anything that is free or very inexpensive, especially a product as chillingly high-priced as health insurance, will attract freeloaders if there is no barrier at all to entry.

But advocates for children and the poor (and most of the poor are children) make a compelling case that Utah's compliance review procedures are among the most difficult for the poor to satisfy and the most expensive for taxpayers to maintain.

And that's one of the big reasons why, despite more federal aid and higher income limits, Utah is among the states doing the poorest job of keeping up with the increased demand for such services as the economy continues to stress the incomes of many families. Fresh data from Georgetown University's Center for Children and Families shows that most states, including Utah, had fewer uninsured children last year than it did in 2008, but that Utah remains behind the curve for lowering that crucial statistic.

A big part of the problem is that Utah, apparently for fear of helping the undeserving, makes it harder for families to qualify for aid, forces them to re-establish their need far more frequently than do other states and disqualifies many families based not on their income but their assets.

Such policies increase the programs' bureaucratic overhead, find very little in the way of savings and discourage families from saving money or building assets for the future for fear of having their children go uninsured again.

The analogy to police and fire services holds. We offer those services to all of our neighbors because catching a criminal, or extinguishing a fire, down the street makes us all safer. We provide health insurance to those who could not otherwise afford it, not out of charity, but out of the realization that it keeps the whole of the community healthier, with less communicable disease, fewer lost school days and work hours and a stronger overall economy and community.

It is in the interest of all of us that the few who qualify for such services receive them, with a minimum of red tape.

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