

# Salt Lake City LDS Ward Helps Congregants Sign Up for Health Insurance

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Many faith leaders in Utah have been vocal about encouraging lawmakers to expand Medicaid in the state. But the dominant faith – the [Church of Jesus Christ of Latter-day Saints](#) – has been silent when it comes to the [Affordable Care Act](#). In the meantime, one LDS ward in downtown Salt Lake City is quietly working to help congregants get access to health insurance.



The 12th ward lies in the inner city of Salt Lake. Bishop David Heslington says his congregation is a diverse mix of retired citizens, middle-aged professionals, young families, and a lot of people struggling with addiction.

“Salt Lake City is addiction recovery central for the state of Utah, so a lot of folks are coming into the central city to find the services that are provided,” Heslington says. “It’s an ongoing challenge and struggle, and if you’re not working full time, there are some real challenges in getting health care.”

Bishop Heslington estimates that one in five of his congregants fall into what’s known as a [coverage gap](#), where they don’t qualify for [Medicaid in Utah](#), but they don’t make enough money to qualify for tax subsidies under the Affordable Care Act. He says many of his congregants have exhausted the social services available and come to him desperate for help.

“If they live within the boundaries of a congregation, a Bishop is charged with helping members and nonmembers after they do all they can on their own, going to families first, friends, but if there is no resources like that available, on a case by case basis, we try to help them,” Heslington says, but there are [limits to what the church can do](#). “Not that we don’t want to help, but we can’t find the resources to help them, and much of it has to do with getting insurance for the services that are needed,” he says.

That's where congregant Sam Vetter comes in. Heslington has called on Vetter to serve as an unofficial health navigator for the ward, guiding people through the Affordable Care Act and new opportunities they may have for insurance. Vetter is not only a professional insurance broker, but also has relevant personal experience. He was laid off about four years ago, and couldn't get insurance due to his wife's pre-existing conditions. Because of her asthma and severe allergies, Vetter and his wife were paying out of pocket for emergency room visits every couple of months. But last fall he was able to purchase insurance in the [federal marketplace](#) established by the healthcare law. Now he says he wants to help other people in his ward.

"The ability that we have to manage our financial situation, and my wife's conditions is so different and such a better position, that anything I can do to help other people achieve that in their lives, I would happily volunteer to connect these people to resources, to help educate them, to essentially be whatever they need as a fellow congregant," Vetter says. "It's just something that I want to do, because these are people I see as my brothers and sisters."

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Vetter says in the past couple of months, he's tried to help about two dozen people, but he says he's only been able to connect five or six to insurance. He was surprised how many fell below the poverty line, didn't qualify for any subsidies, and couldn't afford the premiums.

"The number of people affected was beyond what I expected, and that might be just because the view I get with the community I live in," Vetter says. "Knowing that so for so many people, they are so close, but due to some almost arbitrary income guideline, they're cut off, they're not allowed to get that same benefit has been frustrating."

But it's not just people in the coverage gap who have failed to purchase insurance. There are some who don't seem to really want it. Vetter says, in the last week before the federal deadline, he's been holding an open daily meeting, but people aren't showing up.

"Honestly, and I hate to say it, I do think knowing they have the [church] safety net there is the de-motivator," Vetter says, but he says the church's resources are not endless, and it's no substitute for insurance. "Anyone who's been to the emergency room or been to just a normal doctor and seen the difference in final costs that come out of pocket, can see the huge difference there," Vetter says. "Yes somebody has to pay for that, but you have an insurance company whose sole reason for existence is to look at those risks and weigh them so that they can still manage to make a profit, where as the church doesn't do that. It's going to eat that entire cost... if you abuse it that way."

Vetter has been an advocate for expanding Medicaid or some alternative which would help those in the coverage gap. Bishop Heslington stops short of taking a political stand but he does say his congregants are in need of a solution.

“I think we’re starting to see legislators who are getting a clue about this large, under-served population, that there are people who need help, can’t afford it, can’t find it, and we see that they’re trying to do something and we support those efforts to help people out that need help,” Heslington says.

The Church of Jesus Christ of Latter-day Saints doesn’t take an official position on what Bishop Heslington is doing in his ward. In a statement, Church spokesman Cody Craynor said, “While local leaders work to help meet the temporal and spiritual needs of members, the Church has no coordinated effort to assist members in signing up for health insurance coverage.”