

Health care ethics, Moore and Southern Baptists, mental health care

April 5, 2017

Questions confused

["The ethics of health care explained: Am I my brother's keeper?"](#) confuses the question over whether or not I need insurance with the question of whether or not I'm obliged to help someone else with their insurance.

Granted, the question of the advantages of me having insurance and sharing risks and benefits with the set of other insured people paying into my insurance company is only somewhat debatable. The questions there are whether or not my company responds responsibly to claims and what the company's profit margin is. With the onset of Obamacare my family, and many others, have had very little response to claims because our deductible has been increased by thousands of dollars.

However, it's a different question on whether or not it's my ethical duty to pay for insurance for someone who isn't sharing any of the costs. It's no secret that many of the beneficiaries of Obamacare never have paid for their own insurance and have no plans to ever pay for it. This changes the issue substantially! The question now becomes not whether or not insurance is a good idea, but whether or not it's right for some to be compelled to pay for others. Of course, any Christian may pay for something for someone else as almsgiving, but is it a "Christian" value to mandate exorbitant payments for non-payers so indiscriminately?

I've worked in health care chaplaincy for 32 years, and I've seen the huge difference between someone who needs and appreciates help and someone

who claims an entitlement for which they never paid. The Christian ethic in play here is seen in Paul's word to the Thessalonians: "Whoever doesn't work, doesn't eat." Individual believers and congregations can well determine who needs help and who expects an entitlement, and they are not the same.

Disclosure here, I'm in the generation that has seen the benefits we've worked for our whole lives being poured down the Obamacare drain, and I don't like it; it doesn't feel any more "Christian" than being forced to pay tax money for abortions

Robert Gibbs

San Antonio

Moore told the truth

Ethics and Religious Liberty Commission President Russell Moore is still under fire from radicals in the Southern Baptist Convention because he criticized Donald Trump during the 2016 election season.

So far as I can determine, Moore did nothing but tell the truth. So, why is he apologizing? During the transition and after being sworn in as president, Trump has more than validated all of Moore's concerns. The people who should be apologizing are the prophets who misled 81 percent of white "evangelical" voters and urged them to vote for Trump.

It's not just Moore who should receive an apology but every American, especially Christians.

I was in combat in Vietnam two years and worked for the White House during the final year of the Nixon Administration. Having observed the same people in combat and in a political environment, I think it takes at

least as much courage to maintain one's integrity in a political environment as in combat.

As an example of integrity and courage, consider the attorney general and deputy attorney general who resigned rather than carry out Richard Nixon's order to fire the special prosecutor during the infamous "Saturday Night Massacre."

After radical Republicans seized control of the SBC in 1979, a number of Christian missionaries were forced to resign rather than bow down to the political forces in control of this once-great Christian organization.

It's time for Russell Moore to take a stand. I know about hard choices where one's career is involved as I was investigated at least three times by the Army during my 27 years of service.

Carl Hess

Ozark, Ala.

Mental health care debate

I read ["Protect mental health care in Texas"](#) by Pastor John Whitten in the Baptist Standard. As a family-person advocate family practitioner/pediatrician, I must tell you he is misinformed. While the laws being considered may be flawed, his comments basically advising people to stay away from their primary-care provider are not helpful.

"The Texas Legislature may be hamstringing mental health professionals"? Actually, the penchant for thinking mental health issues can or should only be dealt with by "behavioral health professionals" discounts the maxim that addressing these conditions begins and should cycle back to your primary care team.

“What this would mean is that a person seeking mental health first would be required to see a physician for a referral to see a mental health care provider.” Absolutely! A person with depression and/or anxiety should be seeing their primary-care provider first. Mental health conditions affect the entire body. Your primary-care provider helps you maintain a health plan. The behavioral health people only deal with the brain.

“Physicians are tremendous at practicing medicine but are not trained like family therapists and counselors in mental health and therapy.” Guess what? Mental health conditions are “medicine.” The best health care—vs. sick care—is practiced in teams, and the behavioral health specialists should be integrated with the primary care team.

Bottom Line: Stop supporting the current siloing of health care and advise parishioners to ask their primary-care provider team to work closely with mental health consultants. This will make healthcare delivery less expensive, not more, and will lead to less loss of life and less need for all these consultants, all looking to keep their businesses thriving with redundant visits.

George Patrin

San Antonio

John Whitten replies:

I appreciate Dr. Patrin’s thoughtful response and desire to achieve the best results for the citizens of our state when it comes to mental health care. I am glad he and I share a similar desire to see the best all-around care for our friends and neighbors. Unfortunately, I believe he interpreted my comments too broadly and therefore incorrectly.

I never advised anyone “to stay away from their primary care provider” as Mr. Patrin asserts. What I said was, “Physicians are tremendous at

practicing medicine.” I have some great friends who are doctors, and they absolutely can and often do play a role in facilitating mental health treatment. My argument, as I explained and will clarify, would be that obtaining mental health care *could* and when appropriate *should* include the primary care team *but ought not be required by law* for the purpose of treatment, payment or insurance reimbursement.

I have serious concern with the idea that I would be visiting with a parishioner struggling with alcohol addiction, a person who has lost a loved one or a married couple in need of counseling, and that I would first have to refer them to a primary-care physician before they can get help—which could take many weeks, if not months. In those particular cases, it’s clear what these people need: To be with a licensed counselor. Referring to a primary-care physician would add cost and time. I’m not sure how trained physicians are in handling marriage conflict, for example.

Of course, there are times when mental health professionals—who are licensed and trained—acknowledge the need for a collaborative approach with a primary-care physician. Likewise, there are times when a primary-care physician acknowledges the need for mental health treatment, and there is a team approach. I find common ground with Mr. Patrín in that I think there does need to be more cooperation and collaboration between primary care providers and mental health professionals. The more primary care physicians and mental health professionals work together as a team when necessary, the better for the patient.

However, the Texas Medical Association’s agenda has not been an agenda to work together. The position it has pushed through various legal channels is that anyone who diagnoses anything or uses the word “diagnoses” is practicing medicine unlawfully. I have substantive questions as to the motives of the Texas Medical Association. Should its position be legally adopted, it would significantly damage the citizens of our state.

My concern is that *requiring* a physician referral by law for someone to see another trained professional is not always in the best interest of the patient. To suggest, as Dr. Patrin does, that a person must “absolutely” see their primary care physician first is simply unnecessary in many cases.

John Whitten

Abilene