

Christian HealthCare

NEWSLETTER

MEMBER LETTERS:

No network restrictions allowed us to check prices

Looking back on our Need experience we know God sends guardian angels to watch over us. When Ryan had to have an MRI for back issues, we were nervous. We prayed and talked a lot about the steps we should take. It was calming to know that the financial part would work out with the Shares and prayers of the Body of Christ.

Since we don't have any network restrictions with Samaritan, we didn't have to worry about going to a particular doctor or hospital, so we called around our area to check prices of MRIs and chose the most reasonable one.

We have told all our friends about Samaritan Ministries and how it has greatly exceeded our expectations. This experience confirms our decision to join several years ago, and we couldn't be happier.

*Ryan & Tarin
Iowa*

American health care needs more competition, not less, to bring down prices

by Sally Pipes

Here's a newsflash: when businesses don't need to compete for customers, they tend to raise prices.

Yet the progressive remedy to perpetually escalating health-care costs is not to increase competition—it's to eliminate it completely and put the government in charge of health care, via Medicare for All.

There's ample evidence that a lack of competition is what plagues our nation's health care system. Over the past few decades, large health systems have acquired local stand alone hospitals and physician practices—and used their market power to wallop insurers and consumers.

To fight back, we shouldn't nationalize health insurance. We should foster more competition among health care providers.

Hospital systems have steadily bought out their competition. Consider one recent study from the Health Care Cost Institute, which analyzed hospital markets in 112 metro areas in 43 states. Between 2012 and 2016, the hospital markets in more than two-thirds of these areas grew more concentrated. By 2016, 72 percent of metro areas qualified as "highly concentrated," meaning that just a handful of hospital systems handled nearly all admissions in the area.

As hospital sectors become more concentrated, the price of inpatient

care surges. In Nashville, health costs are approximately 7 percent higher than the national median. The Nashville metro area's health care prices are in the top third nationwide.

A 2018 paper from researchers at Yale, the University of Pennsylvania, Carnegie Mellon and the Massachusetts Institute of Technology concluded that "prices at monopoly hospitals are 12 percent higher than those in markets with four or more rivals."

Hospitals aren't just buying each other—they're snapping up independent physician practices, too. Between 2012 and 2015, the number of physician practices owned by hospitals increased 86 percent. As of January 2018, hospitals

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The *Christian Health Care Newsletter* is published monthly by Samaritan Ministries International, a 501(c)(3) charity. Subscriptions to the *Christian Health Care Newsletter* are available to non-members for a suggested donation of \$12 per year. The information provided is for educational purposes and is not meant as medical advice.

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Sharing Summary from February

Shares:	\$29,878,592	Personalized prayer requests of the members with Needs are in the Prayer Guide. Please use your version of the Prayer Guide to support the members assigned to you.
Needs:	\$29,860,521	
In Negotiation:	\$4,465,074	
New Needs:	4,223	
Total Needs:	8,810	
New Rewards:	243	
Miscarriages:	21	Member Households: 82,160
Final Rewards:	14	(as of 1/21/20)

Contact Us: 877-764-2426 Dash.SamaritanMinistries.org

Questions about?

Your medical need
Shares you are sending or receiving
Your membership

Email

needs@samaritanministries.org
membership@samaritanministries.org
membership@samaritanministries.org

Phone Menu

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Health Resources

Have a Need? Use the Health Resources app on Dash.

- Compare quality and cost of health care services in your area using Healthcare Bluebook.
- Use MediBid to receive bids from doctors for tests or treatments you are seeking.
- Email a medical professional or call a nurse (free), or call a doctor who can write a prescription (\$25).
- Access discount tools for prescriptions and lab tests.

Remember:



1 SEND A NOTE—

Burdens can be lightened emotionally as we encourage one another in the Lord.



2 PAY YOUR SHARE—

Burdens can be lightened physically as we do our part to financially meet others' needs as they would in our time of need.



3 ALWAYS STAY ALERT IN PRAYER—

Burdens can be lightened spiritually as we unite to call upon the God of the impossible.

Finding God in the anxiety of the waiting room

by Elizabeth Reynolds Turnage

Thrum. Thrum. I glanced cautiously around me—could others in the waiting room hear my heart pounding? Only four days ago, an ear, nose, and throat doctor had disrupted our lives with shocking news: Our apparently healthy 22-year-old son appeared to have a brain tumor. Only three days ago, an MRI at the local hospital had confirmed the diagnosis. Only two days ago, we had shared the heartbreaking news with his siblings and their spouses. And just yesterday we had wept through hymns at church proclaiming the goodness of our good Father. Now, one long hour had passed since our son had checked into the top tumor center of our region.

Have you ever been there? In the waiting room of a health crisis? If you haven't, you know someone who has, someone who has experienced the heart-pounding, stomach-souring, head-throbbing anxiety of the wait. As the minutes tick by in the waiting room, your mind trips through the troubling what-ifs:

What if it's cancer?

What if I lose my job?

What if I can't lift my grandchildren?

What if my son is going to die?

These questions and others disrupt the peace of caregivers and patients alike as they endure the agonizing wait of a serious health crisis.

Our son's brain-tumor diagnosis coincided with my 83-year-old father's battle with stage IV prostate cancer. Already my father's primary caregiver, I now became my son's as well. Passing hundreds of harsh hours in multiple waiting rooms, I was met again and again with the hope of the gospel.

In the uncertainty of a health crisis, the following gospel realities can calm our anxious hearts, bringing us peace and hope.

1. Nothing can separate us from God's love

The gospel contradicts the common 21st-century worldview that individual freedom and self-rule bring comfort. The Bible asserts that belonging to the Lord brings comfort. After our son's third brain surgery, he spoke about this comfort.

He was recalling his tumultuous tumor journey with some visitors: two brain surgeries to excise the tumor, a third after his wound had become infected. In the third, a piece of his skull was removed. Our son and his visitors were laughing at the ugly taupe-colored foam helmet he was instructed to wear to protect his vulnerable skull. One visitor, a kind, older gentleman, commented that if anyone could pull this off, our son could, because of his remarkable bravery. The laughter hushed. All was silent for a moment. Our son then spoke slowly, with tears in his eyes:

"Nothing ... nothing can take Jesus and my family and my friends away from me."

In the disturbing realities of a health crisis, even when death is

a real possibility, to be persuaded that "whether we live or we die, we belong to the Lord" (Romans 14:7) and that "nothing can separate us from the love of God which is in Christ Jesus our Lord" (Romans 8:39) brings comfort, peace, and hope.

2. God rules over everything, including every hair of our heads

On that first day in the waiting room, as my heart pounded away, as my mind wandered through the what-ifs, a thought struck: Oh, no! His hair! I realized that our son, who had always carefully groomed his hair, would likely lose those locks to the surgery.

Thankfully, immediately after this unpleasant realization, I remembered something I'd been studying recently—part of the answer to the first question of the Heidelberg Catechism:

He also preserves me in such a way that without the will of my heavenly Father not a hair can fall from my head; indeed, all things must work together for my salvation.

In the losses of a health crisis, peace and hope come from knowing that our heavenly Father is also a gracious King, caring compassionately and ruling kindly over His children (Matthew. 10:29–31).

3. In Jesus Christ, we have forgiveness for sins

It's not uncommon for people in the waiting room to experience a deep sense of remorse and guilt. The patient who is terminally ill may feel

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Brandon and Laura Maxwell: Whetstone Boys Ranch

by Michael Miller

A perfect but scary metaphor for its residents roared through Whetstone Boys Ranch nearly five years ago and almost permanently closed the facility.

But since the 2015 tornado hit the Mountain View, Missouri, area, blowing down trees, damaging property, and shutting down the 285-acre ranch for three months, staff and residents have taken a week each year to work on a log cabin built from the felled wood.

“We call it ‘Ebenezer Cabin’ from 1 Samuel 7, a testament to what God has brought us through,” says Brandon Maxwell, Whetstone director of development.



Brandon and Laura Maxwell with their five children.

Similarly, boys ages 11 to 15 whose families have been hit by spiritual and emotional storms can spend between six and 12 months at Whetstone (whetstoneboysranch.com). The biggest gift they receive is being built into shape like a log cabin from the trees blown around in their lives and families. Like a cabin can only stand with a strong structure, so the boys live with a structure at Whetstone that helps them build a vision of who they are in God’s domain.

“Without structure, the program collapses,” Brandon says. “Everything here is managed, even the free times. They know what to expect.”

That structure is built with chapel, school, chores, work with livestock, and anything else that needs to be done on the ranch. But support includes a lot of one-on-one time with staff as well as time with staffers’ families and camping, hiking, float trips, fishing, trips to museums as well as other educational field trips.

“From the beginning our philosophy has always been low ratio of staff to boys,” says Brandon, one of several Samaritan members on the Whetstone staff. “A boy is going to get individualized treatment, which allows staff to speak truth in his life.”

Most of the boys coming to Whetstone are dealing with a variety of behavioral issues stemming from attachment, substance abuse, depression, and neglect. The goal is to reunite the boy with his family in an environment with “a better foundation” than before.

“A lot of our boys haven’t had good, honest conversations with their families in years, so they sit down with our therapeutic team and really try to work through some of the pinch points,” Brandon says. “The goal is to reunify the whole family unit when the boy is ready to go home.”

When families place boys at Whetstone, they must agree to engage in at least one two-



three-day therapy session during the boy's stay.

Whetstone's capacity is currently nine boys, but it is working to add room for three more in the next few months. Between 12 and 15 boys live at the ranch each year.

"Being a newer facility, we are working towards being able to have scholarships set up for more families so we can take a few boys a year from lower-income families."

Brandon, like Samaritan member and executive director Jeremy Thompson, has been at Whetstone since it opened its doors in 2011. Brandon was an Arizona-based construction project manager when he realized he "wasn't using my talents in the way that God wanted me to."

"I felt there was more purpose, and that God was drawing me to do something different, make more of an impact on lives," Brandon says.

His connection with original Whetstone visionary Nathan Dahlstrom eventually drew him to the project, as did prayer.

"God opened my eyes more to this

idea of Whetstone and softened my heart, opened my eyes to how many hurting boys we have out there that come from broken homes and who don't have fathers in the house, who really experienced some major traumatic life events," Brandon says.

The whole reason any of us do what we do here is because we believe in the power of Christ to change lives.

The Christian faith drives Whetstone's mission, from its Biblically-based name derived from Proverbs 27:17 ("Iron sharpens iron, and one man sharpens another") to its faith in the power of Christ to change lives.

"We're a faith-based program and the whole reason any of us do what we do here is because we believe in the power of Christ to change lives," Brandon says. "One of the goals that we have at Whetstone is to introduce the boys to a lot of different positive activities that will also help them think outside of themselves and be able to think about other people.

"As a staff we try to model the life of Christ. We don't profess to be perfect, but there's a better way to handle your anger than yelling and screaming at family members and fighting all the time."

Brandon says the boys' growth during their stay is obvious as they become servant leaders for the new boys coming in behind them. Some of them have even returned as interns.

"God's in the business of making something beautiful out of our ugly pasts," he says.

Even when they involve tornadoes. ♦

Why SMI?

Brandon and Laura Maxwell are grateful for both giving and receiving Samaritan Ministries Shares.

"What I really like about it is when you are getting checks from people and get a lot of notes. It's more personal. There's more of a community element," says Brandon, Whetstone Boys Ranch director of development.

"On the flip side of sending our Share each month, I love being able to cut a check personally to somebody and have the opportunity to give back and send them a note as well. The personal element of that is obviously so much different than insurance."

He joined Samaritan in 2016 thanks to a health care

stipend from Whetstone.

"We looked at group insurance, and it just was not going to be anywhere feasible for us," Brandon says. "The board decided that probably the best way to still offer the benefit to the employees is to have a stipend for health care. I would say about half of us here have gone with Samaritan because, to be honest, it's the most affordable route to go."

The Maxwells appreciate that Samaritan shares expenses for homebirths.

"That was one thing that was really beneficial for us, because health insurance doesn't cover that," Brandon says. ♦

Craig and Jen Thompson: Rockside Ranch

by Andie Dill

Craig and Jen Thompson founded Rockside Ranch to provide young men in crisis with a fresh start and a new path through nutrition, job and life skills, and discipleship.

Rockside Ranch, started in 2011, is a non-profit working ranch located in the Marble Mountains and Trinity Alps of northern California. Men from across the country ranging in age from 18 to 24 come to the recovery program with addiction issues—most commonly pornography, video games, cell phones, and marijuana. The young men are often homeless, have a lack of purpose and motivation, and are not necessarily followers of Christ, the Thompsons say.



The Thompsons, left to right: Anders (3), Jen, Craig, and Hattie (4)

Craig and Jen's mission is to give these guys the Gospel, show them the love of Christ, cultivate genuine familial community, and provide authentic discipleship. In addition, the Thompsons and their team offer trade-skill workshops and teach the men farming, nutrition, and cooking skills.

Rockside Ranch reports an 80 percent success rate in equipping young men with the skills necessary to live an independent and productive life. Even so, after the men have graduated and gone, Jen and Craig want each one to know he always has a home and a place at Rockside Ranch.

"If they ever come upon hard times again, we always want them to know, 'You don't ever have to be homeless again,'" Jen says.

Jen is fully committed to the ranch and the men God has sovereignly placed on the Thompsons' path.

"Something that we really seek and are passionate about is sticking with the men and knowing them for a

really long time—even when they are not at the ranch anymore," Jen says. "Our guys have a lot of mountains to climb, and we are committed to supporting them for as long as we can."

Rockside Ranch is an eight-month residential program that costs approximately \$20,000, about one-third of the cost of other residential programs. Even so, most of the men who arrive at Rockside are unable to pay even a fraction of that amount.

"We have some guys who can only afford to pay \$50 a month, and that is it," Craig says.

The Thompsons trust that God will provide, though, and they strive to take in as many men as possible.

To make up for the cost, Rockside Ranch relies on the generous support of over 300 donor families, as well as fundraising throughout the year.

Additionally, the Thompsons are so committed to these men and the calling to help, instruct, and disciple them that they take weekend jobs just to make a few extra bucks.



“We are always doing side jobs and anything we can just to piece together extra money,” Jen says. “A couple years back, Craig took a side job on the weekends cleaning rooms in a hotel. It was so sweet and really meaningful to me to see Craig scrubbing toilets at this hotel so that we could put these guys through the program.”

“We are just so committed to them and seeing them thrive,” Jen says. “So often they just do not have anyone who is going to do that for them, and so we want to do it and be those people.”

A day in the life at Rockside Ranch looks a little different than a typical recovery program. While Rockside Ranch is a Certified Recovery Residence through the California Consortium of Addiction Programs and Professionals, it is not a medically-certified rehabilitation center. The focus at Rockside is more on ministry and gaining the life skills needed to be a functioning adult in society.

Each day the men are up about 6:30 in the morning. Morning chores, like caring for and feeding animals,

begin at 7. Breakfast is at 8 and morning devotions are at 9. After breakfast, the men are back out on the farm doing various projects. At 1



The Thompsons feel strongly about the vital role of nutrition and teach the men to steward their health well.

p.m., lunch is served, and then classes begin for the afternoon. Around 4, evening chores and egg collecting happens. After that is dinner and then a final evening session of devotionals and Bible study before bed.

Jen and Craig say they feel strongly about the vital role of nutrition in mental and physical health and spend much time and effort teaching the men why they must care for and steward their bodies well. Everything on the 100-acre property is raised and grown without pesticides, chemicals, or glyphosate products. The men help maintain a large garden, an apple and pear tree orchard, and blackberry bushes. There are 30 acres of pasture where turkeys, horses, cows, sheep, goats, and chickens roam. The pigs run free in the 60 acres of timberland. Operation facilities including houses, roads, barns, shops, and outbuilding comprise the remaining 10 acres. Outside of selling some meat and eggs, all food goes to feed the residents of Rockside Ranch.

Another unique aspect about Rockside Ranch is that the men eat every meal in the dining room of the Thompson home. Jen joyfully spends much of her day preparing all the food while simultaneously caring for the Thompsons' own young children.

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Why SMI?

Craig and Jen Thompson have been encouraged by financial provision, notes of encouragement, and prayers from their fellow members since joining Samaritan Ministries in 2016.

“We really have had a great experience with Samaritan,” Craig says.

The Thompsons' youngest child was born while the family were members.

“We have been so blessed to have been able to bring one baby, and soon a second, into the world under Samaritan, and have people that we do not

even know praying for us and our health and well-being,” Craig says.

The prayers of the saints “have meant so much, and been so significant through these Needs,” Craig says.

Previously, the Thompsons had health insurance, but, after switching to Samaritan, they say they have no plans of going back to that form of health care.

“The Samaritan model of health care has been one that we believe in, and it also gives us the opportunity to be the hands and feet of Jesus,” Craig says. ♦

What we choose to name a disease matters

by Dr. Kenny Lin

A few years ago I was dealing with a series of minor health problems. I developed a sinus infection that took several weeks to resolve. I twisted one of my knees ice skating, and for a while I feared that I had torn a meniscus. Occasionally after eating a heavy meal, I had the sensation that food was getting stuck on the way to my stomach—so along with an X-ray and MRI for my knee, my doctor also sent me for an upper GI series.¹ Finally, my blood tests for a new life insurance policy came back with a slightly high hemoglobin A1c level. The A1c test was once used only to monitor glucose control in patients with established diabetes, but in 2010 the American Diabetes Association changed their diagnostic criteria² to classify an A1c level of 6.5 percent or greater as consistent with diabetes, 5.7 percent to 6.4 percent as prediabetes, and 5.6 percent or lower as normal. So on top of knee tendinitis and gastroesophageal reflux disease (GERD), I also found out that I had prediabetes.

Intellectually, I knew that there was no evidence³ that screening for prediabetes is beneficial (the life insurance company, not my doctor, had ordered the test), and that a screen-and-treat approach to diabetes prevention leads to lots of

overdiagnosis.⁴ Emotionally, it was a different story. I had recently turned 40 and was feeling old. It had been years since I had gotten the recommended amount of physical activity for adults,⁵ and now I was doing even less because my knee hurt. It didn't help that the afternoon I

found out about my A1c level, my wife called and asked me to pick up some Burger King sandwiches and fries to bring home for dinner. Not exactly what a pre-diabetic adult with GERD should be eating.

Would I have felt less sick if I had instead been told that I had “slightly high blood sugar”? In recent years, oncologists have recommended⁶ renaming slow-growing lesions that we currently call cancer, such as “ductal carcinoma in situ” of the breast, indolent lesions of epithelial origin (IDLE), hoping that a less scary term will discourage patients from pursuing unnecessarily aggressive (and potentially harmful) treatment. Similarly, a study showed that telling patients that they have a “chest cold” rather than “acute bronchitis” will help them feel more satisfied when they don't receive an antibiotic prescription.⁷

A systematic review⁸ published in *BMJ Open* supported the notion that what clinicians choose to name a disease influences patients' management preferences. Some study examples: women who were told they had “polycystic ovary syndrome” were more likely to want a

pelvic ultrasound than those who were told they had a “hormone imbalance.” Women were more likely to want surgery if they had “pre-invasive

breast cancer cells” versus “abnormal cells” or a “breast lesion.” Patients were more likely to expect surgery or casting of a “broken bone” or “greenstick fracture” than a “hairline fracture” or “crack in the bone.” In each of these cases, the use of a more medicalized or precise term led patients to prefer invasive management options that were no better than more conservative choices.

How will I apply this knowledge to my daily practice? Although I already use the term “prediabetes” sparingly (preferring “increased risk for diabetes”), I'm going to start telling more patients with A1c levels similar to mine that they have high blood sugar instead. That they have heartburn rather than GERD. That they have overuse knee strains instead of tendinitis. And certain medical terms, such as “advanced maternal age” (i.e., pregnancy after the age of

What clinicians choose to name a condition influences patients' treatment preferences. A more medicalized or precise term leads patients to prefer invasive options that are no better than more conservative choices.

35, or my wife's age when she gave birth to 3 of our 4 children), I will strive to eliminate from my vocabulary entirely! ♦

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This article is for educational purposes only and not intended as medical advice.

Naming could lead to overscreening, overdiagnosis, and overtreatment

The National Cancer Institute's Dr. Barry Kramer did a Q&A about overdiagnosis of cancer:

Q: What is cancer overdiagnosis?

A: Cancer overdiagnosis is the detection of asymptomatic cancers, often through screening efforts, which are either non-growing, or so slow-growing that they never would have caused medical problems for the patient in the patient's lifespan. Some of the detected tumors may even resolve spontaneously without treatment. They therefore represent an important cause of overtreatment, which can involve serious harms and toxicities such as deaths from surgery, major organ deformation or loss, and second cancers from radiation or chemotherapy.

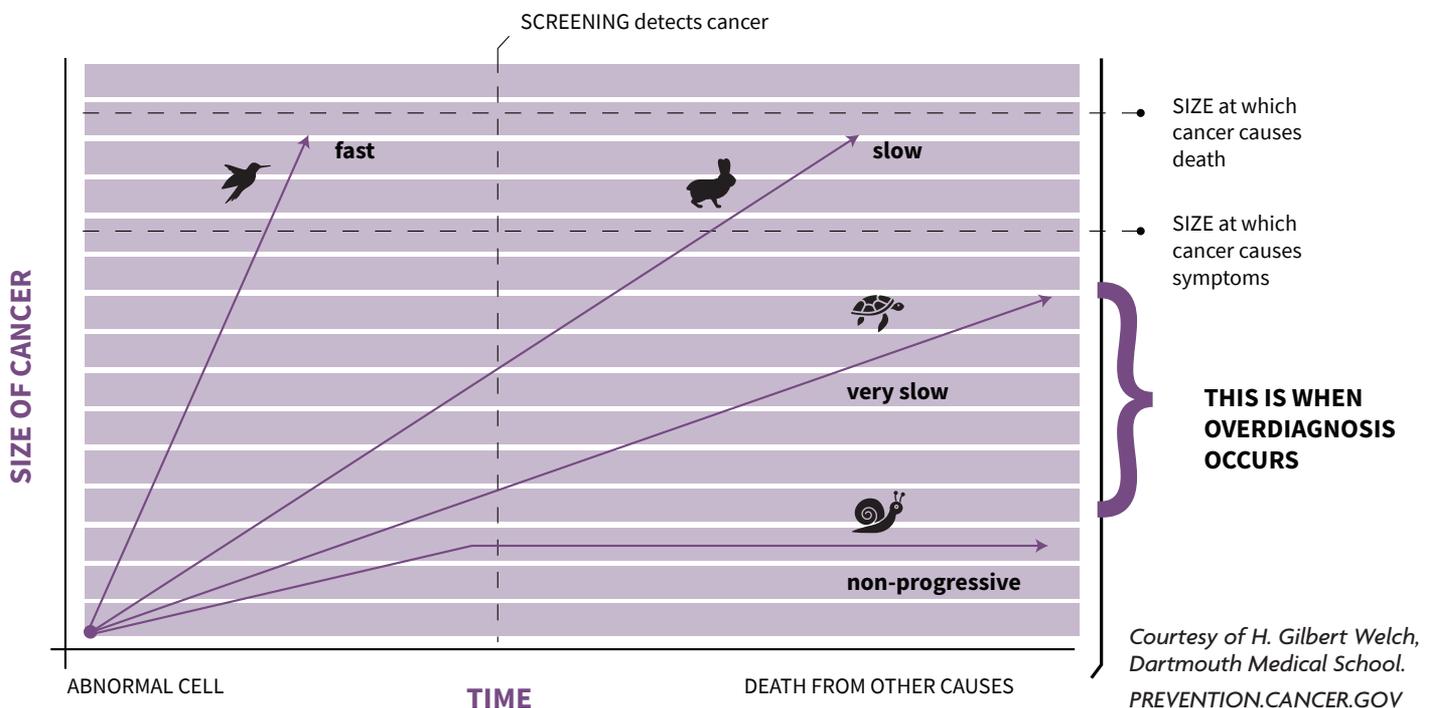
Q: What should people know about it?

A: It is important because of the health consequences to the patient. Treatment of overdiagnosed tumors cannot benefit the patient and yet can incur important harms. People should know that many screening tests can generate overdiagnosis and that the harms resulting from overdiagnosis should be weighed against the potential benefits of the particular screening test under consideration. People should know that not all cancers detected by some screening test need to be treated.

Read the complete Q&A at bit.ly/NIHprev

OVERDIAGNOSIS

occurs when screen-detected cancers are either non-growing or so slow-growing that they would never cause medical problems



PSSST...!



How not to gossip

by member Steven Warhurst

It all started with a comment from a friend: “The pastor seems a bit too friendly with Miss Rogers, doesn’t he? Did you see the way he looks at her?” “Not exactly,” I responded. “Well, it does not look healthy to me,” he said. We parted ways, and I began to watch. I did not see much, but the pastor was smiling a lot while they talked. Maybe there was something to this.

This is where my evil began:

“An evildoer gives heed to false lips; A liar listens eagerly to a spiteful tongue”
(Proverbs 17:4).

I had listened. Now my evil heart was troubled. I wondered to myself, “How could our pastor do this?”

Gossip is a tasty trifle

We sat down to dinner, the children gathered around the table and I asked my wife, “Have you seen the way the pastor speaks to Miss Rogers?” “No,” she replied. “Well, he seems just a little too friendly with her.” My wife’s face was troubled. The children paused. They too were disturbed. Nothing else was said, but the damage had been done.

My oldest child swallowed my evil. The tasty trifle went deep into his soul:

The words of a talebearer are like tasty trifles, And they go down into the inmost body
(Proverbs 18:8).

The following Sunday the pastor preached an excellent sermon about the importance of children honoring and obeying parents. I hoped my son had listened, we had been having some problems with him lately, but my tale had worked upon him like that fruit eaten by our first parents. When he looked at the pastor, everything had changed. In his eyes, the pastor was treacherous. He could not be trusted.

Whoever spreads slander is a fool
(Proverbs 10:18).

Gossip spreads fast

The word had spread, and I was glad to hear someone had confronted the pastor about his improprieties

with Miss Rogers. The next Sunday after worship, the pastor came to me with a stern countenance: "I would like to speak to you a moment about something your child told me."

I stepped into his office and took a seat across from his desk. The sky outside the office window was dark. Storm clouds were in the north. The pastor was noticeably irritated and got straight to the point: "Your son told the Johnsons' daughter that I was involved with Miss Rogers. I asked him where he heard such slander, and he said you told him."

I felt sick.

The north wind brings forth rain,
And a backbiting tongue an angry
countenance (Proverbs 25:23).

Gossip regret

I wanted to take back those words, but it was too late. If only I had done something different that Sunday afternoon. It might have been better to turn on the radio while we ate dinner. We could have listened to some gangster rap! Maybe we should have turned on the TV and watched a steamy soap opera. I could have read the latest news from the Enquirer to the family. Feeding my family this trash may have been better than feeding them that tasty trifle about the pastor and Miss Rogers. Maybe I should have shoved a roll in my mouth and said nothing.

Causing others to stumble

This story is fictional, but it is still true. When we listen to gossip or innuendo that hurts another's reputation, we do evil. When we repeat these tasty trifles in the presence of our children, we poison their hearts.

When our children spread the gossip to their friends, we are the ones who trained them by our example. It would be a better use of our time to hang millstones around our necks and drown ourselves in the nearest body of water.

But whoever causes one of these little ones who believe in Me to stumble, it would be better for him if a millstone were hung around his neck, and he were thrown into the sea (Mark 9:42).

What if we take gossip head on?

What if the main character in our fictional tale had grabbed the man who made the initial insinuations about the pastor, took him by the arm to the pastor asking to speak with him in private. This glorious and courageous deed would have prevented much sin and grief. What do you do if you see something that appears inappropriate? Do not ask two or three people whether they have seen the same thing! Definitely do not ask your wife and children whether they noticed some impropriety. Go talk to the person. Tell them in a straightforward manner your concerns.

In the time of Joshua, the eastern tribes built a great altar by the Jordan River. It appeared to be an unlawful sacrificial altar rivaling the one God had established at Shiloh. When the western tribes heard about the altar, they gathered at Shiloh and prepared for war. They would not tolerate such covenant breaking. They would kill these disloyal brothers.

They had a good case. It was no strained innuendo from the building of an altar to infer an intention to

offer sacrifice upon it, but it turned out the inference was wrong. The eastern tribes had not built the altar for sacrifice but as a witness to future generations, testifying to their union with their western brothers. The eastern tribes feared their physical separation from the western tribes would cause religious division among future generations. The altar, a replica of Shiloh's altar, was to serve as a monument assuring that their descendants would not forget the union between the eastern and western tribes. While the western tribes merely spoke among themselves and speculated, they gathered weapons and prepared for war. When they spoke directly to the eastern tribes, they discovered the reality was different from the appearance. The misunderstanding was resolved because they spoke directly to one another.

Where there is no wood, the fire goes out; And where there is no talebearer, strife ceases (Proverbs 26:20). ♦

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Member Steven Warhurst is Associate Pastor of Westminster Presbyterian Church in Kingsport, Tennessee. He and his wife, Susan, have 8 children and live on a four-acre homestead. Steven loves to teach the Bible and the Great Books of Western Civilization. He enjoys reading, chopping firewood, and hunting.

Finding God in the anxiety of the waiting room

Continued from page 3

regret; loved ones may feel anger and frustration as they care for the patient. Forgiveness is particularly good news in such a space.

One day, in the oncology waiting room with my dad, I received news that angered me. Previously, when I had checked on my dad while I was away caring for our son, he had told me he was “tip-top.” Now, as we sat in this crowded waiting room, he

let it slip that his chemo pill was no longer working—he had stopped all treatment. I was angry because he’d lied to me about his condition. My anger made him feel guilty and ashamed.

Thankfully, he forgave me for being angry, and I forgave him for lying. What brought us both peace and hope in that moment was the truth of Ephesians 1:7: “In Him

we have redemption through His blood, the forgiveness of sins, in accordance with the riches of God’s grace.”

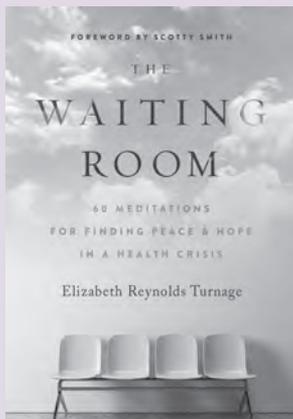
4. Jesus Is Near

Knowing that Jesus is near brings peace and hope to the loneliness and uncertainty of the waiting room. Two aspects of His nearness make the wait bearable.

Book Excerpt

The Waiting Room—60 Meditations for Finding Peace & Hope in a Health Crisis

by Elizabeth Reynolds Turnage



ISBN-13: 978-0998032108

Consider it pure joy, my brothers and sisters, whenever you face trials of many kinds, because you know that the testing of your faith produces perseverance. Let perseverance finish its work so that you may be mature and complete, not lacking anything.

—James 1:2-4, NIV

On the first day of August, I had jotted a note in my prayer journal under my son’s name: “humility and gratitude.” It’s not that he isn’t a generally humble and grateful twenty-two-year-old—but really, what twenty-two-year-old couldn’t stand to grow in this area? (Or what fifty-two-year-old couldn’t grow a little, for that matter?)

This practice was nothing new; it’s what I do. I anticipate or observe character issues in my children, and I begin asking God to work on it. But when our son was diagnosed with a brain tumor two days later, I wanted to take my prayer back. I prayed something like this:

In the first place, God, I didn’t want him to have to *suffer* to gain this humility and gratitude. In the

second place, I didn’t want to have to suffer in order for my son to grow more mature. In the third place, I didn’t really *mean* that prayer.

But God firmly showed me that there are no “take-backs” on this prayer; furthermore, perhaps there were some areas of my character that could benefit from such a trial. God wasn’t content to let me remain unchanged. Instead, He was committed to sanctification.

Sanctification is a big theological word that refers to the process by which God makes His children more like their Savior Jesus: more holy, more mature, more complete. Of the many lessons Scripture teaches about sanctification, two lessons particularly apply here:

1. God saves us with the purpose of making us more like His Son.
2. Whether we like it or not, God often uses suffering to help us grow and mature.

I am a feeble and sinful parent, but I still scribbled a prayer in my journal because I wanted our son to be mature and complete, lacking nothing. God did not scribble when He engraved my name on His hand. He nailed His Son to the cross and wrote my name with Jesus’s blood. Such are the lengths to which our faithful Father has gone to make us, His precious children, mature and complete, lacking nothing. ♦

First, Jesus is close to the broken-hearted (Psalm 34:18). His nearness soothes our anxiety; His nearness blankets us with the surpassing peace which can only be found in Him.

During our son's third surgery, which was unexpected and therefore left me alone in the waiting room, my anxiety skyrocketed. Waiting to hear whether the infection in the wound had spread to his brain, my heart beat so rapidly that my Apple watch urged me to breathe. I chose instead to pop in my earbuds and listen to the hymn, "Tis So Sweet to Trust in Jesus." As I listened, Jesus's peace washed over me, soothing me as a mother soothes her panicked baby.

Second, the Greek word used in Philippians 4:5 ("The Lord is near") also refers to His soon return. This anxious season in the waiting room won't go on forever. One day, Christ will come back, and our deepest hopes will be fulfilled as He makes all broken brains and hearts and limbs new (Revelation. 21:5). In that day, God will dwell with His people, and we will know true and lasting peace.

Today, as we pass tense moments in the waiting room, we will find peace and hope in remembering that day—when we will finally live as God designed us, glorifying Him and enjoying Him fully and forever. ♦

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Elizabeth Reynolds Turnage (elizabethturnage.com) is the author of The Waiting Room: 60 Meditations for Finding Peace & Hope in a Health Crisis. A writer, teacher, and story coach, she is the founder of Living Story ministries, where she helps people learn, live, and love in God's story of grace.

Jen strives to teach the men to look at food labels and to pick foods with the least amount of ingredients. For most of the men, who were either homeless and eating whatever they could get their hands on or spending their days

going through fast-food drive-throughs, or getting their meals at a gas station, a sit down home-cooked dinner at the dining table is a huge difference, Jen and Craig say.

It's part of that fresh start that the men of Rockside Ranch need. ♦

How Craig and Jen's dreams came together

A ranch-based recovery program like Rockside Ranch is a natural for Craig and Jen Thompson.

Craig grew up in a family of farmers. Upon graduation from college, he thought about how farming could be used as a platform for life change in men who are struggling as well as an opportunity to share about the Lord.

"Farming is constant problem solving, requiring flexibility and adapting to the things that come up every day," Craig says.

His vision for Rockside Ranch began in 2008, at the age of 22. Three years later it was opened.

Jen grew up in Los Angeles, but every summer she would visit her grandmother's farm in Montana.

"I always loved the way I felt when I was in wide open spaces," Jen says. "I just remember even back as a small child wanting to have a ranch someday."

As Jen got older, she started going on mission trips to Mexico and loved getting dirty, working with her hands outdoors, and being in community with other people.

Through both experiences, Jen began to pray about and cultivate the idea of starting a working ranch where people could be outdoors and work together and come to know the Lord.

Those two dreams converged when Craig and Jen met in college. Craig had always had a crush on Jen, but Jen was not interested and would often try to set her friends up with Craig.

In summer 2010, one year after Jen had graduated and two years after Craig had graduated, Craig invited Jen up to work at the summer camp he was working at. One day Jen shared with Craig her desire to have a working ranch ministry. Craig knew then that Jen was the woman God had created for him.

At the end of the summer, after only a couple months of dating, Craig proposed to Jen and they were married on the last day of that year—December 31, 2010.

Just months later, both Craig and Jen's dream of a working ranch where young men could be disciplined and witnessed to was born, and Rockside Ranch opened its doors. ♦

owned roughly 80,000 physician practices throughout the United States.

This consolidation has cost patients. Physicians in the most concentrated markets charge 14 to 30 percent more than those in the least concentrated markets, according to a 2014 study. On average, consolidation over the previous two decades caused an 8 percent increase in physician fees.

So how can we promote competition? We can start by abolishing the certificate-of-need laws in force in more than two-thirds of states, including Tennessee. These laws require health care providers to convince state officials that there's a need for their services before they're allowed to open.

Certificate-of-need laws effectively give incumbent providers a veto over the entry of competitors into a market. Incumbents routinely lobby government officials, braying that a new hospital will lead to job losses.

Policymakers are loath to upset politically powerful hospitals—and potentially lose their employees' votes.

Those barriers to entry result in less competition and higher prices for consumers. States with certificate of need laws have 11 percent higher health care costs than those without them, according to a analysis from the Heartland Institute.

A Mercatus Center study found that repealing certificate-of-need laws in Tennessee would likely result in the development of 63 new hospitals, including 25 rural hospitals. Such a move would also reduce annual health spending by \$223 per capita.

Outcomes would be better, too, absent certificate-of-need laws. The Mercatus analysis found that deaths from post-surgery complications in Tennessee would decline more than 5 percent without certificates of need. Hospital readmission rates and mortality rates from heart attacks, heart failure, and pneumonia would

also decline.

Greater price transparency can also foment competition. Consumers are eager to shop around for care. Thirty-six percent of patients use the internet or mobile apps to compare the quality and cost of different services, according to a 2018 UnitedHealthcare survey. More than eight in 10 of those who shopped around found the process at least somewhat helpful. One in 10 changed both their provider and health care facility based on the information they learned.

Competitive market forces have driven down costs and enhanced the quality of goods and services in every sector of our economy. It's about time we tried the approach in health care. ♦

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Sally Pipes is the President of the Pacific Research Institute.

Member Letters: Competition among providers is key to reasonable price

I think God has blessed me through my Need in several ways. First, even though I had no symptoms of gallbladder problems, my case of gallstones was detected by a test for another condition.

Second, I practiced watchful waiting and didn't have any problems until a year later when I did have one painful attack, which I believe was the Lord letting me know that I needed to go ahead with the gallbladder removal surgery.

Third, when my gallbladder was removed it was found to be in worse condition than the doctors expected, so the Lord was protect-

ing me. I believe that He allowed me to live without pain right up to the surgery. He has also watched over my healing process, which has gone very well.

I had my surgery at the Surgery Center of Oklahoma, and I am so thankful they offer competitive pricing to keep the hospitals honest. Healthcare Bluebook shows that my surgery could have cost three times as much if done in a hospital. By posting accurate pricing online, Surgery Center of Oklahoma is following a true Christian model.

*Ronald & Arla
Kansas*

To share one another's health care burdens I believe is what God intended. God never intended for the government to do what we individuals ought to do. Because I am dependent on Shares from fellow brothers and sisters in Christ, I am much more attentive to how much and for what services I am being billed. Ultimately, only personal responsibility and providers competing for our business can drive the cost of health care down.

God bless all the members and staff at Samaritan.

*Lawrence
Kansas*

Prayer for the Persecuted Church

Hebrews 13:3 tells us to “Remember those who are in prison, as though in prison with them, and those who are mistreated, since you also are in the body.” Our brothers and sisters in Christ around the world are being persecuted for the sake of the Gospel. We need to remember them in prayer. Each month, we will provide updates and offer prayer points gleaned from a variety of sources. Please use them in your personal or group prayer time.

Nigerian leader beheaded

A Nigerian church leader was kidnapped and beheaded in January, Vanguard News of Nigeria reports. The Rev. Lawan Andima, 58, was abducted by the Boko Haram Islamic terrorist group on January 2 and murdered days later. The late director of the Christian Association of Nigeria was married and had nine children. In a video released during his captivity, Pastor Lawan was shown saying, “I have never been discouraged because all the conditions that one finds himself are in the hands of God.” *Pray for comfort for family and friends of Lawan and for the Nigerian government to do more about the recent increase of Christian persecution there.*

3 arrested for praying

Three Christians in India were arrested in December after fellow villagers accused them of medical malpractice for praying for the sick, Voice of the Martyrs-Canada says. The three were gathered with others for worship on December 10 when other villagers burst into the home. Nine were detained and released, while

three of them were later called back and placed under arrest for praying for physical healing. *Pray that charges against the arrested believers—Pastor Mukam Kiraad, Lalsingh Tomar, and Nanliya Rawat— will be dropped and that they will have opportunities to further spread the Gospel in their village.*

Turks arrest priest

A Syriac Orthodox priest arrested by Turkish authorities on January 10 for sharing food with an outlawed Kurdish group has been released, but two other Christians remain in custody, AhvalNews.com reports. Sefer Bileçen, also known as Monk Aho, was detained along with village leaders Musa Tash Takin and Youssef Yar. *Praise God that Aho has been released. Pray for the others still in custody of Turkish authorities and that Kurdish Christians would find freedom in Turkey.*

3 teachers murdered

Three Kenyan Christian teachers were killed by the terror group al-Shabaab on January 13, ICC reports. Militants ambushed Kamuthe village after destroying a telecommunications tool. Caleb Mutua, Titus Ushindi, and Samuel Muthui Kyonzu were killed. A fourth teacher, Joshua Mutua, survived with leg injuries. *Please pray for the families of the victims and for healing for Joshua Mutua. Pray also for protection for Kenyan Christians.*

Algerian church closed

Algerian authorities have closed another church, ICC says. The evangelical Oratoire Church in Oran was first ordered to close in February 2018 but reopened that June. It was closed again for refusing to obtain government permission to operate. Several churches have been closed

in recent years in Algeria for similar reasons. *Pray that the Oran church will be allowed to reopen and that congregation members will find worship opportunities.*

Christian woman arrested

A Christian human rights activist was arrested on January 12 in Iran after she made several tweets about governmental repression, ICC reports. Mary Fatemeh Mohammadi was taken to an unknown location. *Pray that Mary will be safe and that she will be released soon. Pray also for revival in Iran following recent government crackdowns.*

3 churches razed twice

Three temporary structures replacing destroyed churches were themselves burned down on January 16 in Bout, Sudan, ICC says. Islamic extremists are suspected of burning down the original structures—a Sudan Interior church, a Roman Catholic church, and an Orthodox church—on December 28. *Pray for safety for members of these churches and for their ability to build new structures without threat.*

Christians denied safety

Christians needing refuge in Syria are facing persecution, Christian Broadcasting Network says. Many of them are being blocked from refugee camps in Jordan, Lebanon, and other places in the Middle East by United Nations officials who are Muslim. *Pray that Syrian Christians and all others affected by the war there will find safe places in these countries.* ♦

For more on the persecuted church, contact International Christian Concern (persecution.org, 800-422-5441) or World Watch Monitor (worldwatchmonitor.org)

Be not wise in your own eyes; fear the Lord, and turn away from evil. It will be healing to your flesh and refreshment to your bones.

Proverbs 3:7-8

The first way we should seek good health and healing is through humble dependence on God—fearing Him and turning away from evil. This doesn't mean we shouldn't seek medical care, but medical care and health care providers shouldn't be where we place our faith.

Romans 8:13 was written to believers and warns, "If you live according to the flesh you will die, but if by the Spirit you put to death the deeds of the body, you will live."

James 5:14-15 instructs us, "Is anyone among you sick? Let him call for the elders of the church, and let them pray over him, anointing him with oil in the Name of the

Lord. And the prayer of faith will save the one who is sick, and the Lord will raise him up. And if he has committed sins, he will be forgiven."

These truths do not mean that whenever someone is sick, it is always because of their unconfessed sin. They do not mean that righteous people never die. They do mean that, when we are sick, Jesus Christ is the One Who we should turn to for healing and refreshment—first, last and always.

For the Kingdom,



Ray King