

Second Evening Rosh HaShana Drash

5774/2013

By Lucy Zammarelli

Good Yontief,

This is a special time of the year: A time of repentance, conciliation and repair; healing of the soul; and an opportunity for redirection of behaviors. Today I tossed the last of my Passover Matzah into the Willamette River, completing Taschlich, letting the Bread of Affliction carrying my wrongdoing away and bringing me further out of my narrow place of constraint. I have joined with my community in prayer and supplication, taking accountability for the wrongs of others as well as my own. This is a basic concept in Judaism--that of shared responsibility, which creates unification between the individual and the community. This is a profound obligation, and it took me years to understand and feel comfortable with it, and to see it as a part of my spiritual practice.

On this Holy Day of Rosh Hashanah, in addition to spiritual renewal, I want to ask you to consider physical renewal too. Please, take a moment and check in with your body...how do you feel? Stiff from sitting, or tired from standing, aching from hard work, or are you perfectly comfortable? (wait a few moments) The Kabbalists teach us that we live in four worlds simultaneously--the physical, (the body), the emotional (heart), the intellectual (mind), and the spiritual (Soul). The body can teach us a great deal about physical renewal, since it is in a perpetual state of regeneration, each cell replicating over and over throughout our lifetimes, enabling us to maintain our form for the length of our days. When this process works perfectly, we say we are in good health.

The Torah instructs us to preserve our health: "Guard yourself and guard your soul very carefully" it states in Deuteronomy (4:9-10). The Soul is a spark of G-Dliness, and it can only enter the physical world in the garb of the physical body; thus the body is the Soul's instrument to attain G-D's

purpose for us in this world. Only through the body can we carry out the commandments of the Torah, and complete the Mitzvot which all relate to things of this world. Through this work our Soul is elevated, attaining good in this life and forever.

Bodily health is the foundation for this. When the body is unfit and unhealthy, this detracts from proper fulfillment of the commandments. So it is very important to preserve good health, and very precise instructions are found throughout the Torah, such as the observation of the Laws of Purity, (Leviticus XI) and the admonishment not to speak ill of others (Numbers 12), to keep the self pure and healthy. Maimonides devoted an entire chapter of the Mishneh Torah to detailed guidance on proper diet, cleanliness, exercise, sleep and much more. He wrote:

"Bodily health and wellbeing are part of the path to G-d ...
Therefore one must avoid anything that may harm the body and one must cultivate healthful habits." (Mishneh Torah)

As Maimonides was himself a physician, he understood this concept especially well.

Throughout the Torah, G-D is revered as the Healer of the body, and prayer and Torah study are prescribed for illness. In Exodus G-D states: "I am the Lord that heals you!" (15) and we thank G-d each morning for the wonders of the body when we say "Baruch atah Adonai, rofay hol basar umafli La asot"...Blessed are you, miraculous, the wondrous healer of all flesh. And in Numbers, there is a beautiful prayer for healing based on the words of Moses as he pleads with G-D to heal Miriam (12): "Ana, Elna, Refa Nah La." The Babylonian Talmud states "Everything is in the hands of Heaven (except chills and fevers, which sometimes come though negligence.)" And while there is admonishment not to trust magicians and soothsayers in Deuteronomy (18) the Torah mentions physicians as early as Genesis, when Joseph calls for physicians to preserve Jacob's body for its travel to the Cave of Machpelah.

Medical care appears to be a well entrenched part of early Biblical civilization. The obligation to heal is traditionally derived from Exodus 21:

“And if two men fight, and one hits the other with a stone or his fist, and [the victim] does not die. . . [the aggressor] shall cause [the victim] to be thoroughly healed” (which has been interpreted as a requirement that the aggressor pay the physician's bill.) The Jewish view of medicine is possibly best expressed by the Josef Karo when he explains the responsibility that is granted to physicians in the Shulchan Arukh:

“The Torah gives permission to the physician to heal; moreover, this is a religious obligation and it is included in the obligation of saving a life. If the physician withholds services, he [or she] is considered a shedder of blood. . . . However, one may not engage in healing unless they are an expert and there is none better qualified present, because if this is not the case, they are considered a shedder of blood.” (Shulchan Arukh, Chapter 1)

The Torah also states the obligation to rescue an endangered person: “Do not stand idly by the blood of your neighbor” (Leviticus 19). It is the obligation of each of us to assist a person in need of help. And on Saturday morning during Shabbat services, a list of names of those who need healing is read, and those present pray for their healing, using Moses’ words: “Ana, Elna, Refa Nah La.” Thus we see that in the Torah and historically, as well as in our own lives, health care is regarded as an important part of life, and tending to the health of others is part of the communal responsibility.

Most of us are in agreement with this Jewish perspective on health. In addition, we live in a time where our health is strongly impacted by our healthcare system. Primary care physicians work daily to keep people healthy and out of the hospital, but still, for many, good health eludes them, and they may contribute to poor health unintentionally through food and eating habits, inactivity, risky behavior, alcoholism or drug use, and other physically harmful activities.

One of the dilemmas of today’s healthcare is that the American system is quite complicated. This is often because of cost—good care for chronic and acute diseases, as well as catastrophic illness, comes at a cost. Care

for serious illness is beyond the economic means of all but the most wealthy. For this reason, health insurance is a boon; by sharing the cost of care across a large number of subscribers, everyone who needs care can get it if they are covered by insurance. Currently, health insurance is tied to employment, and this creates great disparity. Across workplaces, insurance benefits vary greatly. If one is unemployed, it is very expensive to buy individual health insurance. And many employers do not offer it at all. Many people have been impoverished by high medical bills contracted when they were without health insurance, causing bankruptcy and high debt.

Across states, benefits for federal health care insurance vary greatly as well. For the most impoverished citizens, particularly children, Medicaid covers health care costs for those well under the Federal Poverty Limit. At age 65, most Americans qualify for basic Medicare, which provides about 80% coverage for the cost of care, but which covers minimal preventive care. Preventive care includes vision and dental care, as well as chronic disease management, such as nutrition classes, tobacco cessation, weight loss programs, and behavioral health services to treat substance abuse, mental illness such as depression and anxiety, and trauma recovery services. Unfortunately, most health insurance plans offer a limited or no benefit for these services. Yet these are very important for good health, and actually reduce the costs of acute and catastrophic care by reducing the effects of chronic disease.

President Obama addressed these issues in a comprehensive way with the Affordable Care Act, known as the ACA, which he signed in March 2010. This law is an overhaul of the American healthcare system, and is designed to simplify the process of getting health insurance. It requires coverage for a set of basic care services including behavioral health and preventive care, and expands publicly subsidized coverage so that nearly all Americans are covered by a health insurance plan. This bill was highly politicized and has been challenged in court and repeatedly attacked by state and federal lawmakers, although it was substantially upheld by the U.S. Supreme Court in June 2012. The bill is long and complicated, but the intent is simple: Provide health care coverage for as much of the

population as possible, thus reducing indigent care costs including acute emergency hospitalizations and improving the health of all Americans.

However, many states have decided not to embrace the ACA, preferring the current system with its known costs and practices to a new system filled with unknowns. Oregon's Governor John Kitzhaber was a consultant on the ACA, so it is no surprise that Oregon is leading the way in ACA implementation. Last summer, in August 2012, Oregon disbanded the Medicaid health plans across the state and implemented Coordinated Care Organizations which are new and innovative managed care plans for Medicaid members that provide physical and behavioral health coverage, as well as dental and vision benefits. Care Coordinators help members access the care they need, and help them to limit the care they do not need but which they may inadvertently be choosing (such as overuse of emergency rooms.) Primary Care Physicians are expected to communicate and coordinate care with specialists and behavioral health experts, to provide a holistic care model. Many innovative treatments are being used, based on research that shows their effectiveness while reducing costs and improving patient satisfaction. In Lane County, the Coordinated Care Organization is Trillium Community Health Plan. Currently, there are approximately 55,000 Trillium members and in January the ACA expansion is anticipated to add up to 27,000 more members. Also in January, the ACA health insurance exchange called CoverOregon will begin health insurance coverage those who don't qualify for Medicaid but have no employee provided coverage. Everyone is expected to have coverage of some sort or will be assessed a tax penalty. As you can imagine, this is somewhat controversial! There are many challenges for Coordinated Care Organizations too, including a lack of Primary Care Physicians; slowness in adapting new patient care protocols; logistical difficulties in co-locating physical health and behavioral health services; and healthcare inequality and disparities often caused by demographic and economic differences. For example, poverty and low education levels impact lifestyle choices and food purchases; race and ethnicity impact practitioner responses to patients; physical disabilities impact care recommendations; literacy and language differences impact proper

understanding of a doctor's instructions; rural locations impact access to needed services; and there are many other factors that contribute to disparities that affect good health and the length and quality of life.

Interestingly, research shows that one of the biggest predictors of poor health across the lifespan is trauma in childhood. Dr. Randy Phelps, one of our community's most respected developmental pediatricians, will be talking about children's issues at tomorrow's evening service, and I hope you will join me to hear him. Childhood Traumatic Stress is extremely common, and many children experience multiple stressors. Without interventions, children grow into adults who tend to embrace especially unhealthy lifestyle choices, including school dropout, community and domestic violence, tobacco and substance use, risky sexual practices, criminal activity, and mental illness. They often have poor health care as well. All these factors contribute to poor health outcomes with increased chronic disease, higher cancer rates, lower quality of life, and decreased lifespan. One of the goals of the Coordinated Care Organizations is to recognize and intervene with these factors through Care Coordination and shared communication systems, so that the patients are not navigating a complicated care system without help. For example, one of the new services that have been embraced by Coordinated Care Organizations are Community Health Workers—professionally trained but non-clinical community care advocates who assist patients in getting the services they need when they need it.

The ACA has really changed the way that health care is delivered in Oregon, as well as the way that it is paid for. Many people have wondered if this is a good thing. The new system is not guaranteed to be better than the old, and it forces everyone to buy health insurance or have it provided by their employer, and those costs can be substantial for individuals and small businesses. Since premiums are similar for all purchasers, but healthy people use few services while unhealthy people use more services, insurance forces the healthy to pay for the care of the unhealthy. Many have wondered if that is even legal, as it seems unfair to force healthy working people to use their resources to provide coverage for people who

often live unhealthy lifestyles and may be choosing not to work. The Supreme Court may have deemed it legal, but what about Jewish law?

At the beginning of this talk, we reviewed the Jewish value of community responsibility, and we heard the Torah's views on the responsibility of the community to care for the health of every person. Jewish law also perceives economics as a part of life, and affirms that governments have the power to set laws for the good of the majority at the expense of the individual. And while the community may be called upon to provide health care for an individual, it can also encourage that individual to be responsible for their health, and it can teach them how to do that. The Torah's perspective is that each individual is responsible to care for the body which G-d entrusted to them. And we each also have a responsibility to participate in an insurance system which is for the good of the whole community, and which provides quality healthcare with dignity for all.

Health care is really very simple—take care of yourself and others as the Torah commands; when ill, pray for healing--and take advantage of your health insurance to get the expert care that you need. And do all of this in service to your Divine Soul, so that you may fulfill the work of the Holy One.

I hope you will join me in my hope that together, we can create a just and dignified health care system that meets the needs of everyone in our country.

La Shana Tova!

Lucy Zammarelli