



MEDICAL-LEGAL PARTNERSHIPS: ADDRESSING THE UNMET LEGAL NEEDS OF HEALTH CENTER PATIENTS



• Welcome and Introduction to the RCHN Community Health Foundation Webcast Series:

Feygele Jacobs, MPH, MS EVP/Chief Operating Officer RCHN Community Health Foundation



Featured Speaker:

• Peter Shin Ph.D., M.P.H. Associate Professor Director Geiger Gibson Program (GGP) in Community Health Policy Research Director, Geiger/Gibson RCHN CHF Research Collaborative Department of Health Policy

George Washington University School of Public Health and Health Services



Featured Speaker:

• Ellen Lawton, J.D.

Executive Director National Center for Medical-Legal Partnership



Featured Speaker:

• Marsha Griffin, M.D.

Medical Director, Medical Legal Partnership Rio Grande Valley

Medical Director, Campus Care Clinics for Brownsville Independent School District

Pediatric Medicine Physician Brownsville Community Health Center Brownsville, Texas

Co-Founder and Director, Community for Children



Addressing the Unmet Legal Needs of Health Center Patients

Peter Shin George Washington University

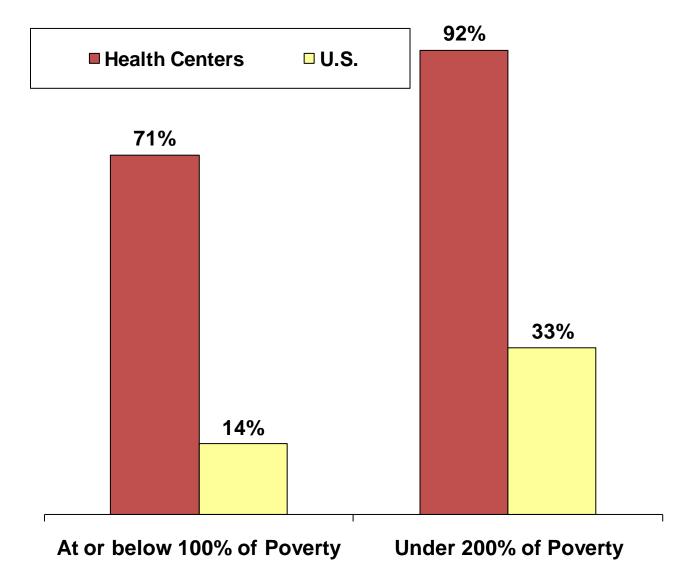
October 12, 2010



Acknowledgements

- Peter Shin, Fraser Byrne, Emily Jones, Joel Teitelbaum, Lee Repasch, and Sara Rosenbaum, "Medical-Legal Partnerships: Addressing the Unmet Legal Needs of Health Center Patients." Issue No. 18. United Health Foundation and the Gibson/RCHN Community Health Foundation Research Collaborative, May 4, 2010.
- RCHN Community Health Foundation
 www.rchnfoundation.org
- www.gwhealthpolicy.org

Health Centers Serve Disproportionately Poor

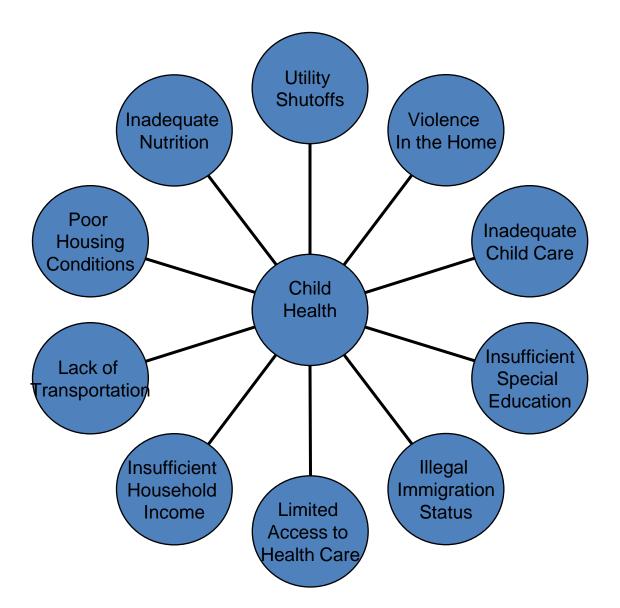


Source: GW Analysis of UDS data, 2009 and Current Population Survey: Census 2009.

Select Ancillary Services Intended to Address Barriers to Better Health

	On-site	On-site or by referral
Coordinate health and psychosocial support services (case management)	92%	98%
Secure access to health, social and other public programs (eligibility assistance)	92%	98%
Identify and educate potential patients about available services (outreach)	93%	97%
Help patients to qualify for Medicaid (out-stationed eligibility workers)	37%	79%
Assist with nursing home and assisted-living placement	37%	80%
Assess and address unhealthful living conditions (environmental health risk reduction)	31%	93%
Assist in obtaining housing	29%	90%
Provide employment/educational counseling	16%	89%

Source: 2007 Uniform Data System, HRSA



Source: Presentation by Medical-Legal Partnership for Children in Durham (Duke Pediatrics, Lincoln Community Health Center, Duke Children's Law Clinic, and Legal Aid of North Carolina).

Estimate of Unmet Legal Needs

- 50-85% of health center patients require health-related legal assistance
- Methodology:
 - Active MLP FQHCs: 40-100%
 - Literature: > 50%
 - Limitations:
 - Sample
 - Number, severity, type of legal issues
 - Inability or awareness of legal problem

Health-related Legal Issues

- Housing
 - Evictions, utility, habitability
- Income supports
 - Public benefits, elderly, food security, credit
- Family and personal stability
 - Divorce, domestic violence, child custody, disability/special needs, end-of-life
- Employment and discrimination
- Legal status (immigration)

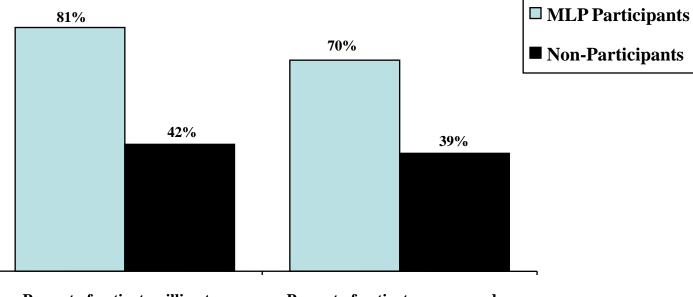
Challenges

- Assessing costs and sustainability
 - Funding sources:
 - federal/state programs
 - Foundations and private contributions
 - Pro bono assistance
 - Revenues
- Integrating legal services
 - Understanding need
 - Finding the right partners

Impact

- Patients:
 - Reduced stressors
 - Reduced medical debt
 - Increased access to preventative medicine
 - General well-being/outcomes
- Health centers:
 - Revenues
 - Staff time/productivity
 - Community health/Cost-savings

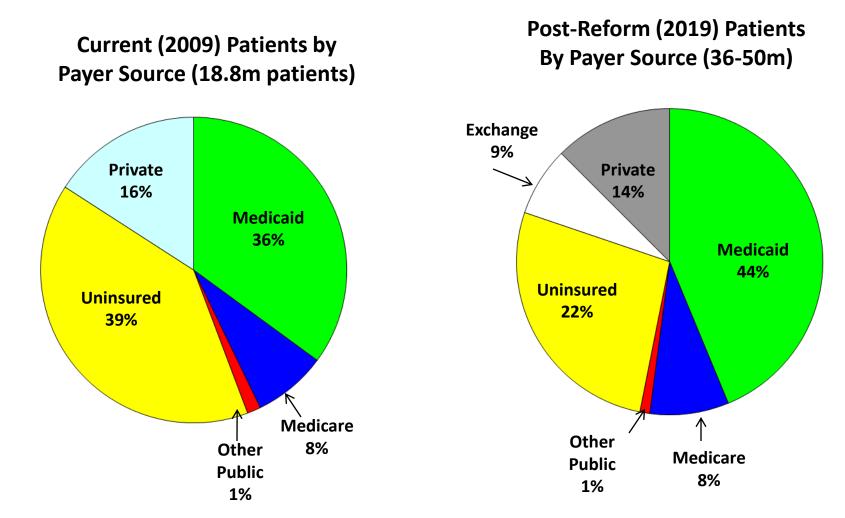
Impact of Medical-Legal Partnerships in Health Centers



Percent of patients willing to share health related legal problems with physician Percent of patients empowered to access needed services

Source: http://www.innovations.ahrq.gov/content.aspx?id=2412

Health Center Patients by Insurance Type, 2009 and 2019



Source: Ku, L., Richard, P., et al., "Strengthening Primary Care to Bend the Cost Curve: The Expansion of Community Health Centers Through Health Reform." Issue No. 19. Geiger Gibson/RCHN Community Health Foundation Research Collaborative, Jun 30, 2010.

Medical-Legal Partnership:

Transforming Healthcare for Vulnerable Populations

Ellen Lawton, Esq. Executive Director

National Center for Medical Legal Partnership

The Need for MLP Begins Here: **One Patient's Story**

•62-year-old Lonnie Evans was diagnosed with cancer in 2007.

•With the high costs of medical treatment, he and his wife Edith no longer had enough to get by.

 Step by step, the Tucson Family Advocacy Program helped Edith and Lonnie obtain disability benefits, in addition to food stamps and medical insurance.

"If it wasn't for the program, there would have been a couple times where I would have given up. But with the help of the program I learned a lot. I learned to be my own advocate, to know what I can do and how to go about it."

-- Edith Evans







The Need for MLP

EXHIBIT 1

Legal Needs That Affect Health

Legal need	Examples of legal needs that affect health
Income/insurance	Insurance access and benefits Food stamps Disability benefits Social Security benefits
Housing	Shelter access Access to housing subsidies (such as Section 8 program) Sanitary housing conditions (such as mold or lead) Foreclosure prevention Americans with Disabilities Act compliance Utility access
Education/employment	Americans with Disabilities Act compliance Discrimination Individuals with Disabilities in Education Act compliance
Legal status	Immigration (asylum, Violence Against Women Act) Criminal record issues
Personal/family stability	Guardianship, custody, and divorce Domestic violence Child and elder abuse and neglect Capacity/competency Advance directives Powers of attorney Estate planning

source Adapted from Kenyon C, Sandel M, Silverstein M, Shakir A, Zuckerman B. Revisiting the social history for child health. Pediatrics. 2007;120:e734-38. These authors adapted the I-HELP assessment tool.

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The Need (cont'd)

 Adverse social conditions that impact health frequently have legal remedies, BUT

1:6,581 Ratio of legal aid attorneys to clients

1:525 Ratio of attorneys to clients

1:28,000

Ratio of legal aid attorneys to clients in Carbondale IL



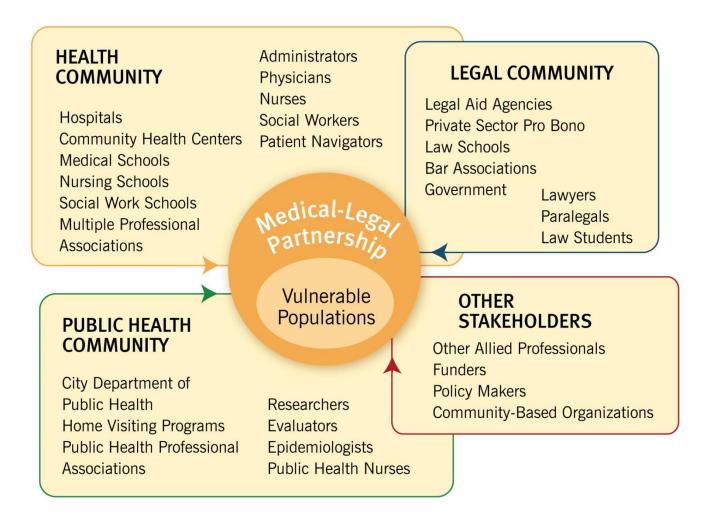
National Center for Medical 🚺 Legal Partnership RAISING THE BAR FOR HEALTH

The MLP Model

Medical-legal partnership is a healthcare delivery model that integrates legal assistance as a vital component of patient care.

National Center for Medical Legal Partnership

Community Partnerships



National Center for Medical 📒

Legal Partnership

How the MLP Model Works: Core Components and Activities

Medical-legal partnership's three key activities transform the delivery of health and legal services to improve health for America's most vulnerable individuals and families.



How the MLP Model Works (cont'd)

1. Legal Assistance in the Healthcare Setting:

Attorneys and paralegals become members of the healthcare team, assisting patients on-site at hospitals and health centers with legal issues, such as unhealthy housing conditions and disability benefits.



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How the MLP Model Works (cont'd)

2. Health and Legal Institutions and Practice Transformation:

MLPs reorient healthcare and legal services towards early detection and preventive care through training and education for providers, residents and students.

MLP teams improve institutional practices to address legal needs, such as establishing hospital policies regarding low-income utility protections.

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How the MLP Model Works (cont'd)

3. Policy Change:

MLP teams leverage health and legal expertise to improve local, state and federal laws and regulations that impact the health of vulnerable populations.



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Source: DestinationDC

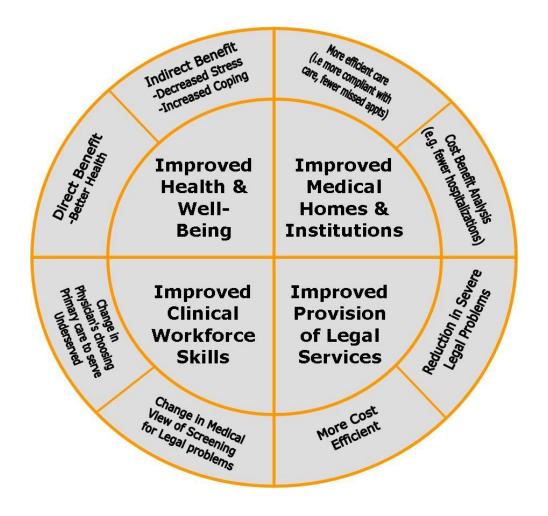
How Does it ACTUALLY Work (who pays?)

Programs match funds between legal and medical partner, diversity of revenue streams:

- ✓ Legal aid federal or state funds
- ✓ Philanthropy
- Hospital and health center budget
- ✓ Community benefits
- ✓ % of reimbursements
- ✓ HHS grants (AHEC, chronic disease or disparities reduction)

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Impact of MLP



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Support for the MLP Model















ROBERT WOOD JOHNSON FOUNDATION Commission to Build a Healthier America



National Association of Public Hospitals and Health Systems









MLP for Health Act

- The bi-partisan MLP for Health Act was introduced in the U.S. Senate and House of Representatives on July 29, 2010
- The bills were referred to the Senate HELP Committee and the House Committee on Energy and Commerce
- The Act calls for a nationwide federal demonstration project through HHS and authorizes \$10 million for each FY 2011 through 2015

Full Text from the Library of Congress Senate bill: <u>http://thomas.loc.gov/cgi-bin/query/z?c111:S.3668:</u> House bill: <u>http://thomas.loc.gov/cgi-bin/query/z?c111:H.R.5961:</u>

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The MLP Network

MLPs are now operating in more than 225 hospitals and health centers in 38 states nationwide.

MLPs serve vulnerable populations including children, the elderly, adults with disabilities, and patients with cancer and other chronic illnesses.

As of Sept. 2010, the MLP Network includes:

- •100 hospitals
- •122 health centers
- •28 medical schools
- •46 residency programs

- •80 legal aid agencies
- •38 law schools
- •46 private law firms

In 2009, MLPs provided legal assistance to 13,000 individuals and families, and trained 10,000 healthcare providers to recognize the connections between unmet legal needs and health.

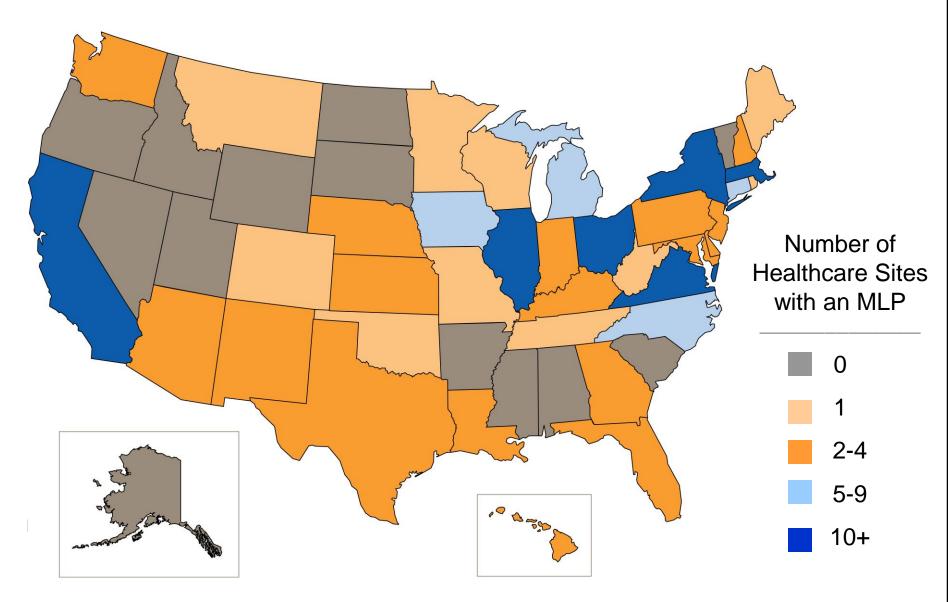
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MLP in 2010

National Center for Medical **C** Legal Partnership

Legal Partnership

225 hospitals and health centers



How NCMLP Can Help

Matching of Potential Medical and Legal Partners NCMLP helps interested community members find an appropriate legal or medical partner in their community.

Site Visits To Support Partnership Activities

NCMLP staff conduct site visits at partnership sites to provide indepth technical assistance

Annual Training Conference

The 6th annual National Summit will be held on March 24-25, 2011, in Baltimore, MD at the Sheraton Inner Harbor Hotel.

Technical Assistance

NCMLP provides a range of technical assistance services to guide sites in planning, implementation and action.

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Medico-Legal Partnership today...







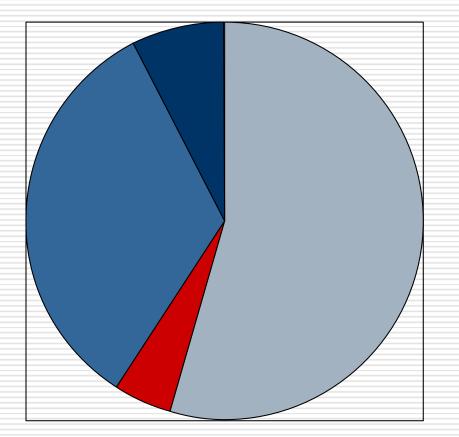
Marsha Griffin, MD, Medical Director

What is a MLP?

An MLP partners lawyers with doctors to ensure that families' basic needs – for housing, food, education, health care and family stability – are met.

Our mission is to promote the optimal health and well-being of patients by training physicians and staff to identify legal problems that harm patients' health and to introduce legal advocacy into the clinical setting.

Status of cases...

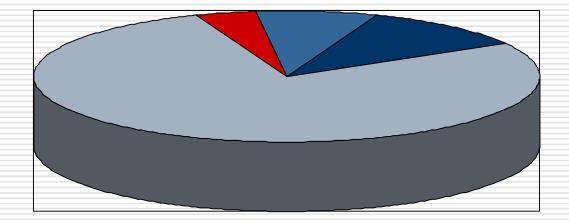


Closed	68%
Pending	7%
Rejected	15%
Accepted	10%

More than 80% of the cases are accepted and reviewed by TRLA attorneys.

Referrals received: 400 approx. TOTAL CASES: 279

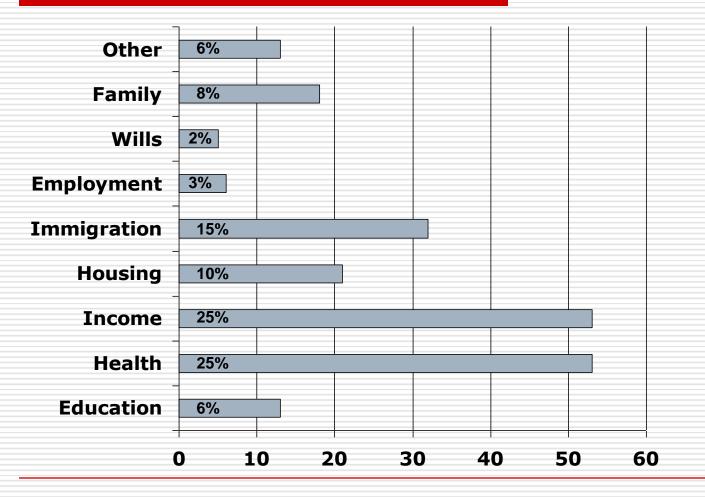
On closed cases...



Advice 77 %
Admin. Dec. 4%
Negotiation 8%
Lim. action 11%

TOTAL CLOSED CASES: 268

Types of cases...



TOTAL CASES: 279

Impact in the community...

With 279 opened cases, we estimate that we have had a positive impact on more than **900** families in the Brownsville community.



Recent Case: Housing

- Patient came to us because her landlady suing to evict her, claiming \$3000 in unpaid rent.
- Went to court eviction case thrown out.
- Discovered that lease came with "option to purchase" home, owners trying to unlawfully keep deposit and charging unlawful fees.
- Currently negotiating for the return of \$2,660 in deposit and unlawful late fees

Patient testimonial...

SSI Disability denial Client:

"MLP staff helped me after I had a heat stroke because I was working outside in very high temperatures. That problem disabled me for life. I was desperate because I wasn't able to keep working and I didn't have any money for food or to support my family. I didn't know where to get assistance and no one helped me with my problem. The MLP attorney gave me advice on what to do, how to apply for my benefits and went with me to my hearing. Thanks to MLP attorney, the benefits that were denied many times were granted at that hearing. Now, I have an income that helps me to keep going and to keep supporting my family".

Patient testimonial...

Breast Cancer Medicaid denial.

"Thanks to TRLA and MPL staff my wife had the chance to keep receiving breast cancer treatment. When we move from Massachusetts to Texas, all medical assistance was denied and she was without her necessary radiotherapy treatment for three months. We could not afford her treatment because it is very expensive and our economical conditions are limited. Medicaid was denied for her in at least four times before I found MLP program. MLP staff advised us to appeal the last Medicaid denial. We appealed and MLP staff negotiated with the Medicaid office, and that same day Medicaid benefits were granted. My wife is still fighting her cancer, but now she is covered by Medicaid and she is receiving all her treatments. The MLP service is very professional. I am very happy and will always be very thankful with them and with God for this new chance in our life."

What's next?

Health care recovery dollars

These are funds reimbursed to health providers as a result of a successful appeal of improperly denied Medicaid or Social Security Disability application. Normally, when a hospital or community health center has treated an uninsured individual whose application for public health insurance has been denied, the hospital or community health center will remain unpaid for those services provided, or the patient will assume the cost.

We selected six patients that, as a result of our services, received Medicaid or SS Disability benefits

Patient 1	\$883	Patient 4	\$1,216
Patient 2	\$352	Patient 5	\$524
Patient 3	\$1,216	Patient 6	\$1,765

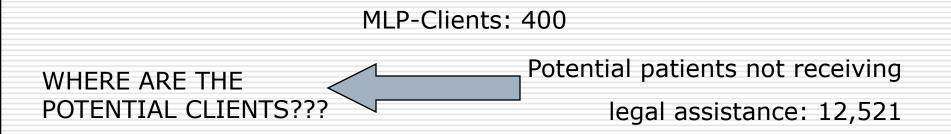
Total recovered on a sample of 6 patients: \$5,956

Eligibility

According to Legal Services Corporation (LSC), to be eligible for Legal Aid assistance, the client must be on or below 125% of federal poverty level.

Total BCHC patients: 17,049 (2009)

BCHC patients under 125% poverty level: 12,921

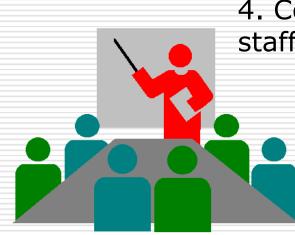


What are we doing to reach these clients?

1. Staff surveys

2. Staff meetings

3. Community outreach



4. Conferences with experts training medical staff, nurses, medical assistants, etc.

5. Personalized training to doctors

Survey

sample

	ase re	turn at the end of th	0							
1.		is your job at BCHC? (P								
		ministration		House Keeping			Nursing	. .		
	b. Fi			Health information services	n		Women's			
		ovider					Pharmacy Usedah Ed	r		
		ental Health		Front desk			Health Ed			
		mpus Care Center		Eligibility			Social Ser			
	g. De	ano a Mano		Billing Charge Entry		u.	Americor	ps		
	h. Se			Lab\Radiology						
2.	-	ou familiar with the Me what do they do?	dico-Legal Part	tnership (MLP)?	Circle:		Yes	No		
3.		u know how to make a	referral to MLI	?? Circle:	Yes		No			
4.	Have	vou ever made a referra	al to MI.P?	Circle:	Yes		No			
		why not? (Circle all that								
		It's not my job.		g.	My undocu	nented	l patients v	vorry they		
	b.	Not enough time/I'm to	o busy.	_	may be repo	orted.	-			
	c.	I do not know how.		h.	My patient	will no	t get what	he\she nee		
	d.	It's too complicated.			anyways.					
	e.	I worry about getting su	1ed.	i.	My reason:					
	f.	I worry my undocumen would be reported.	ted patients							
5.	Which would make you more likely to refer patients to MLP? (Circle all that apply.)									
	a.	I knew what MLP was	-	-	-	-				
	b.	An simple referral form	was available							
	c.	Someone told me how t	o make a referr	al						
	d.	I was reassured my und	locumented pat	ients would not b	e reported					
		i was reassured my und								
	e.	I knew I could not be su								
	e.			assisted by MLP						
	e. f.	I knew I could not be su		assisted by MLP		-				
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December 2, 2010:

The Affordable Care Act, Medical Homes, and Childhood Asthma

• invitations and web registration out soon



Thank You

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