

Medical–Legal Partnerships

BY JOHN KEZER AND JESSICA PEKALA



*This article explains the use of medical–legal partnerships
to improve the treatment of health care patients.*

As the U.S. health care system battles excessive costs, overutilization, and disjointed care—all while producing inferior health outcomes compared to other high-income countries¹—policy experts and health care professionals are looking toward new, alternative ideas to fix these issues and provide higher quality, cost-effective services.² One innovative and expanding strategy to achieve these purposes is the formation and implementation of medical–legal partnerships (MLPs). MLPs are flexible partnerships between attorneys and health care providers who work collaboratively to address patients’ unmet legal needs with the overall goal of also improving the patient’s health.³ While MLPs began in the early 1990s, they have been slow to take off in many areas of the country, including Colorado. This article provides an introduction to MLPs, including what role they serve, how they originated, and what MLPs exist in Colorado today.

What are MLPs?

MLPs address patients’ legal concerns in conjunction with their medical care.⁴ The idea behind the partnership is that by addressing patients’ legal needs, their overall health status will improve as well.⁵ Further, the “[m]edical–legal partnership teams often detect patterns in patients’ needs that reveal opportunities to advance policy solutions for whole communities.”⁶

MLPs often place a legal team of attorneys, paralegals, and law students directly within a medical setting. This enables the legal team to collaborate in real time with the primary care medical providers, behavioral health professionals, and social workers who are caring for the patients. Understanding the entire

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picture of a patient’s life, including the social determinants of health, allows the attorneys and the medical professionals to treat the patient more effectively through coordinated efforts.

Social Determinants of Health

A patient’s physical well-being is one small piece of his or her overall health status. Other

factors, including lack of affordable and safe housing, food insecurity, health insurance and public benefit denials, low level of educational achievement, disabilities, and legal status, can contribute negatively to one’s physical and mental health.⁷ These factors are known as the social determinants of health. If not taken into consideration during medical treatment, they will often render that treatment useless and allow physical and mental health conditions to worsen.

For example, a patient newly diagnosed with diabetes and struggling to cover the cost of several prescriptions may find himself unable to afford food costs—especially the higher cost of healthier food. At each follow-up visit, the patient’s medical provider will likely continue to counsel him on the importance of a well-balanced, healthy diet and weight loss in the overall management of diabetes. If the provider has no idea that the patient is struggling to cover the costs of food, the nutrition counseling is futile. This is where an assessment of the patient’s social determinants of health, which usually involves a brief survey with a social worker or care manager, can make the difference. Identifying the need for prescription cost saving assistance or Supplemental Nutrition Assistance Program (SNAP) benefits would help this patient afford healthier food and work toward positive management of his diabetes. In collaboration with the medical provider, social worker, and care manager, an attorney with an on-site MLP could assist with the initial SNAP application and any potential appeals down the road.

The National Scene

The National Center for Medical–Legal Partnership (the National Center) was founded

MLP RESOURCES

The following resources are recommended reading for attorneys interested in forming an MLP to advocate for the underserved in health care settings.

1 Attorneys interested in developing an MLP should first review Tobin-Tyler and Teitelbaum's *Essentials of Health Justice: A Primer* (Jones & Bartlett Learning 2019) ("persistent advocacy in support of health justice is critical to changing the laws, policies, and systems that can either positively support or negatively impact the health of vulnerable populations.").

2 For the nuts and bolts of forming an MLP, begin with the National Center for Medical-Legal Partnerships Toolkits (Phase I: Laying the Groundwork and Phase II: Building Infrastructure), <https://medical-legalpartnership.org>. This website also has valuable fact sheets and case studies under the "Resources" tab (e.g., "Brief: Socially vulnerable older adults & medical-legal partnership," "Case study: The NYC Health + Hospitals-LegalHealth medical-legal partnership," and "Fact sheet: Financing medical-legal partnerships").

3 To better understand the state of health care costs in Colorado, review "Healthcare Affordability: Untangling Cost Drivers," Network for Regional Healthcare Improvement (Feb. 13, 2018), www.nrhi.org/uploads/benchmark_report_final_web.pdf, and the Center for Improving Value in Health Care's "Total Cost of Care Multi State Analysis," www.civhc.org/wp-content/uploads/2018/02/Total-Cost-of-Care-Spot-Analysis.pdf ("[a]s health care costs continue to rise in Colorado and across the nation, it's essential to better understand what is driving increases in order to change our current unsustainable trajectory.").

4 Finally, a cost analysis is crucial, but the need to capture and address the social determinants of health is even more critical. More details about the social determinants of health can be found in the Health Leads Screening Toolkit (Sept. 17, 2018), <https://healthleadsusa.org/resources/the-health-leads-screening-toolkit>.

in 2006 and is a treasure trove of information and resources about MLPs. As stated on its website, the National Center "leads education, research, and technical assistance efforts to help every health organization in the United States leverage legal services as a standard part of the way they respond to social needs."⁸ According to the National Center:

Last year, medical-legal partnerships helped more than 75,000 patients resolve legal issues that were impeding their health, trained more than 11,000 health care providers to better understand and screen patients for health-related social needs, and engaged in projects designed to improve how clinics and policies address health-related social conditions for entire communities.⁹

Studies have shown that when legal expertise and services are used to address social needs,

- those suffering from chronic illnesses are admitted to the hospital less frequently;
- patients more commonly take their medications as prescribed;
- patients report less stress and experience improvements in mental health;
- use of preventive health care increases, and less money is spent on health care services for the patients who would otherwise frequently go to the hospital; and
- clinical services are more frequently reimbursed by public and private payers.¹⁰

Additionally, clinicians tend to have a positive view of MLPs. In a 2016 survey of MLPs

across the country, 66% of them responded that clinicians at their hospital or health care center reported improved health outcomes for patients as a benefit of an MLP.¹¹

A Brief History of MLPs

When physicians at Boston Medical Center noticed that their pediatric asthma patients were returning to the hospital with regularity and frequency, they took it upon themselves to investigate. They discovered that these patients were living in mold-infested apartments and had landlords who refused to comply with sanitation regulations. It became clear that any medical treatment given to these children would have simply been a stopgap measure. To see improvement in their patients' asthma control, the physicians would have to tackle the social issues contributing to their negative outcomes—in this case, noncompliant landlords and subpar housing. The physicians teamed up with Greater Boston Legal Services, and the first MLP was formed in 1993.¹² Then the attorneys working for the newly formed MLP came into the picture. By taking on the noncompliant landlords, the attorneys were able to assist the affected families in securing healthier housing and ultimately improving the patients' asthma-related symptoms.

It was not until the early 2000s that word began to spread about the Boston MLP and practitioners began to form similar MLPs throughout the country.¹³ While MLPs have found their place in hospitals, veterans' health systems, and specialty clinics, their greatest growth in recent years can be seen within community health centers.¹⁴ Generally, community health centers care for vulnerable, underserved populations and already employ a team of various health care professionals. Adding an MLP to the mix helps patients receive even better, more comprehensive services.

Over the past several years, more than 300 MLPs have been formed across 46 states, with two MLPs currently existing in Colorado.¹⁵ The first MLP in Colorado was set up in cooperation with Colorado Legal Services and Children's Hospital. But, like many MLPs nationally, it was disbanded due to funding shortfalls. Years later, in conjunction with the University

of Colorado Law School, Salud Family Health Centers (Salud) began an MLP (MLP Colorado) at its Commerce City clinic in 2013. Salud is a system of federally qualified health centers set up throughout rural areas of Colorado that provides quality and affordable health care with integrated medical, dental, pharmacy, and behavioral health services. Adding attorneys to Salud's team of health care providers was the logical next step in providing comprehensive care to its patients.

The integrated MLP at Salud is staffed by three attorneys. Their practice is very different from that in a courtroom or a "traditional" law office. MLP Colorado's cases depict the reality of vulnerable populations and how integrated medical, legal, and behavioral health care serves such populations. The partnership takes on issues such as landlord-tenant disputes, Social Security Disability Insurance appeals, and immigration claims.

MLP Colorado uses the I-HELP assessment tool to screen patients who are receiving care at Salud. The I-HELP tool addresses issues of income, housing, education/employment, legal status, and personal family stability and safety.¹⁶ These are the legal needs that can often affect a patient's overall health. When a medical provider, behavioral health specialist, or care manager receives a positive response to an I-HELP question, that patient is referred directly to the on-site team of attorneys.

MLP Colorado was the only MLP in the state until Denver Public Health recently added an MLP pilot program to its cadre of services. The Denver Health Medical-Legal Partnership Program serves patients who use the Westside Pediatric and Intensive Outpatient clinics. This MLP is a collaborative effort between Denver Public Health, Community Health Services, Westside Pediatric Clinic, Intensive Outpatient Clinic, and Denver Health's General Counsel Office.

MLP Colorado in Action

The MLP Colorado cases summarized below provide an overview of how MLP Colorado attorneys work in collaboration with the medical and behavioral health staff at the Salud clinic to care for clients and address all legal, social,

and medical needs to improve their overall well-being.

Landlord-Tenant Dispute

An older woman presented to the Salud clinic for medical care and was quickly referred to the MLP Colorado attorneys. During her medical visit, her primary care provider discovered that the patient's landlord had hauled away her rental trailer with all of her possessions inside, including her hearing aids. The woman

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was left homeless and was spending nights in her car. The attorneys jumped in to assist in the landlord-tenant dispute, and helped the woman obtain clothing, food, and temporary shelter. One attorney even temporarily took the client's dog home with her. The primary care provider was able to focus on the patient's medical concerns knowing that the MLP Colorado attorneys were working to resolve her legal and social needs.

Social Security Disability Insurance Appeal

A 61-year-old U.S. Air Force veteran was unable to continue working as a truck driver due to shoulder and back injuries from years of strenuous work. He applied for Social Security Disability Insurance (SSDI) in 2013 and was initially denied benefits. After he filed an appeal, his primary care physician at Salud referred him to MLP Colorado for an evaluation of his claim. He retained MLP Colorado attorneys to represent him at the upcoming hearing for his appeal.

While preparing for the hearing, the veteran's wife passed away unexpectedly. MLP Colorado attorneys referred him to a behavioral health provider at Salud to help him with the grieving process. During his visits with the behavioral health provider, he revealed that he had felt symptoms of severe depression and anxiety for a long time and without the referral, he may never have sought treatment. The behavioral health provider supplied a written statement on his psychological health conditions that proved to be crucial evidence in the case. At the hearing, the judge found that due to both his physical and mental health conditions, the patient could no longer work and issued a favorable decision. The veteran now receives monthly SSDI benefits and is awaiting a check for past benefits. He continues to see the same behavioral health provider.

Immigration Issue

A 44-year-old man who suffers from severe cognitive impairments that limit his ability to process and retain new information presented to the Salud clinic and was referred to MLP Colorado. Although he had been a lawful permanent resident since 1992, he never applied to become a U.S. citizen because he did not understand the paperwork and was afraid he would not pass the civics portion of the interview. After meeting with the patient, MLP Colorado attorneys prepared all necessary forms for his naturalization application. His behavioral health provider at Salud assisted by completing a request for exemption from the civics portion of the interview based on his cognitive impairments.

Thanks to these efforts, the request for exemption was granted and the patient was able to complete all necessary parts of the naturalization interview. He became a proud U.S. citizen in February 2018.

Conclusion

Collaboration between legal, medical, and behavioral health providers is vital to the overall health and well-being of vulnerable populations. With the growth of MLPs, attorneys have the opportunity to take on a unique role working directly in the medical setting and collaborating with other professionals over many areas of law. Joining an MLP in Colorado is one way to succeed in improving the lives and health of clients in need and participating in the “health equity challenge of our time.”¹⁷ 

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NOTES

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3. See generally National Center for Medical-Legal Partnership, <https://medical-legalpartnership.org>.
4. See Regenstein et al., “Commentary: Addressing Social Determinants of Health Through Medical-Legal Partnerships,” *Health Affairs* (Mar. 2018), www.healthaffairs.org/doi/10.1377/hlthaff.2017.1264.
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7. Office of Disease Prevention and Health Promotion, Social Determinants of Health, www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health.
8. National Center, *supra* note 3.
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10. *Id.*
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