

MLP in Action

**Partnering with Legal
Services Providers to
Enhance Behavioral
Healthcare Access and
Outcomes**



PART 5

April 10, 2024

1-2 PM ET

HRSA

Health Resources & Services Administration

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Moderator



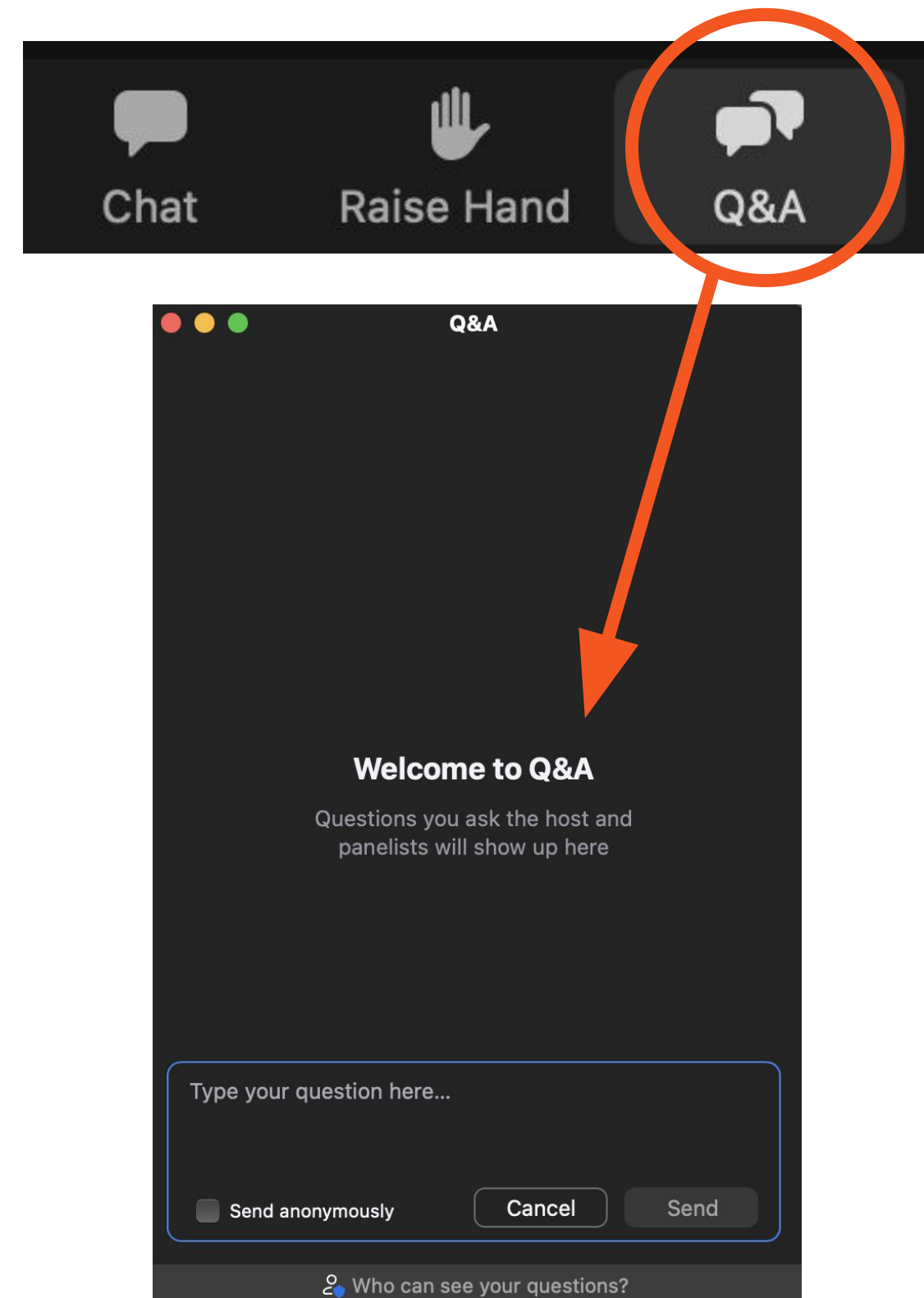
Bethany Hamilton, JD

Director

National Center for Medical-Legal
Partnership

Housekeeping

- Attendees are muted throughout the webinar.
- Type questions into **Questions & Answers pane**.
- To activate captions, select **“Live Transcript”** and **“Show Subtitle.”**
- This webinar will be recorded and shared at <https://medical-legalpartnership.org/mlp-resources/medical-legal-partnership-in-action-webinar-series/>
- Send a chat to the **Hosts & Panelists** for help.



Poll Questions

1. Tell us who you are:

- Health Center (Grantee or Look-Alike)
- Certified Community Behavioral Health Clinic
- Community Mental Health Center
- Civil Legal Services Organization
- Public Defender Services
- Law School
- Medical School
- Hospital
- Primary Care Association
- Health Center Controlled Network
- Courts
- Other

2. Does your organization have a Medical-Legal Partnership (MLP)?

- Yes
- No
- I don't know

3. Does your MLP partner with a behavioral health care provider?

- Yes
- No
- I don't know
- I do not have an MLP

Subject Matter Experts



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Learning Objectives

- ★ Gain insights into the role of medical-legal partnerships (MLP) in addressing legal needs as a social determinant of health affecting behavioral health access and outcomes.
- ★ Analyze real-world case studies to recognize the impact of legal interventions on improving behavioral health outcomes.
- ★ Explore effective workflow and staffing considerations for integrating legal screenings and assessments into behavioral health care settings.

Roadmap

What do we need to understand about Health Centers and Medical-Legal Partnerships (MLP)

Who are Indiana Legal Services, Inc. (ILS) and Eskenazi Health

How the Sandra Eskenazi Mental Health MLP Operates

Why Having Access to an MLP is a Necessary Component of Public Health: Case Studies

Roadmap

**What do we need
to understand
about Health
Centers and MLP**

Health Centers

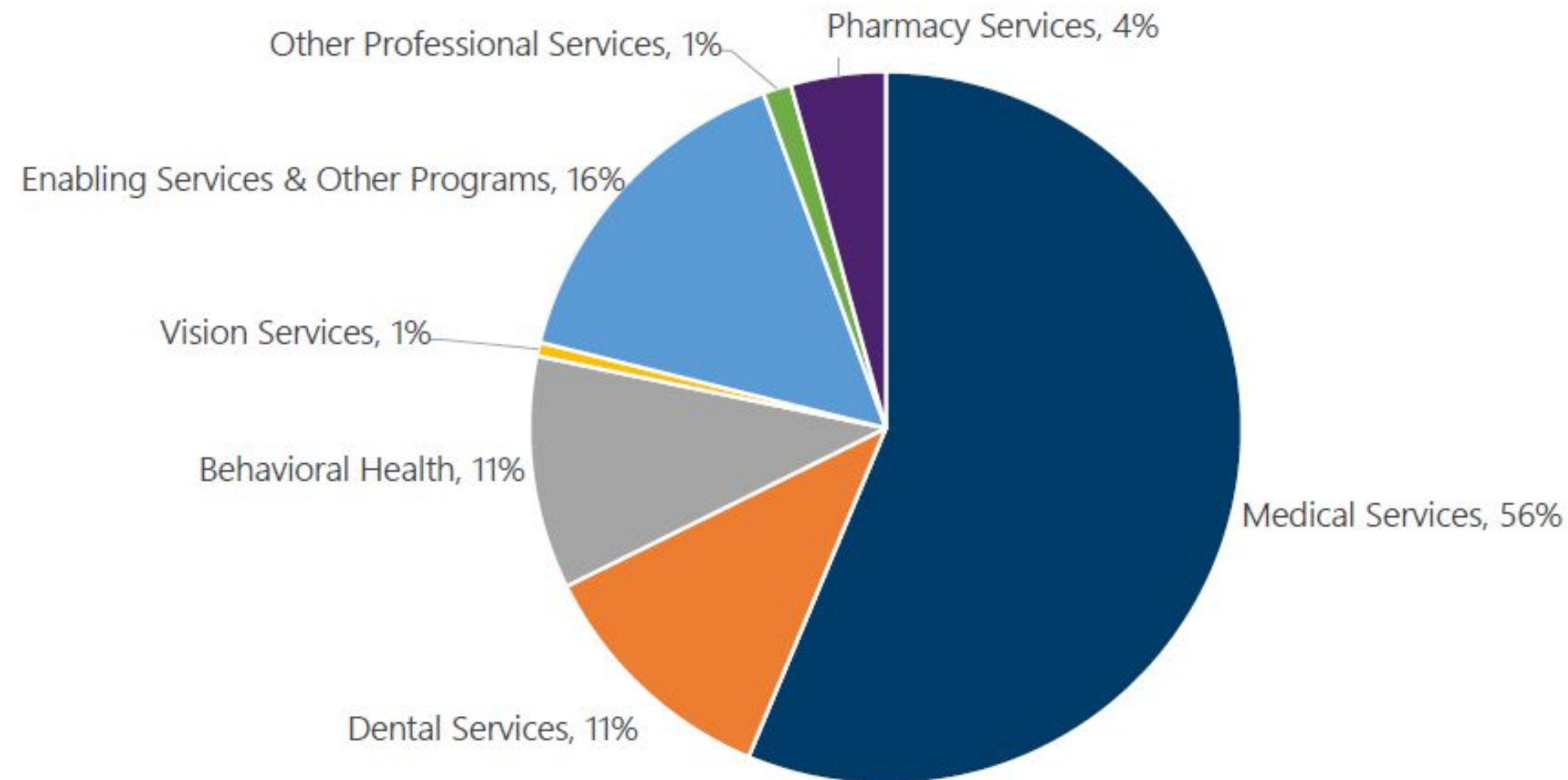
About Health Centers

| Health Center Model | Health Center Services | Health Center Patients |
|---|--|--|
| <ul style="list-style-type: none"> ● Health Center Program began with Section 330 of the Public Health Services Act of 1965, and is administered by HRSA <ul style="list-style-type: none"> ○ Health Center Grantees and Health Center Look-Alikes ○ FQHCs, MHC, HCH programs ● There are approximately 1,400 health centers across the US operating at over 15,000 sites ● Health centers provide community-based, patient-directed, comprehensive, and high-quality primary care and preventive services | <ul style="list-style-type: none"> ● Health centers address medical, dental, behavioral, pharmacy, and other health care needs. ● Health Centers also provide enabling services that facilitate access to care: <ul style="list-style-type: none"> ○ <i>Since 2014, enabling services have include “civil legal aid services” as an example of eligibility assistance and additional enabling/supportive services.</i> | <ul style="list-style-type: none"> ● In 2022, Health Centers served over 31.5 million patients including: <ul style="list-style-type: none"> ○ 1 in 3 uninsured people ○ 1 in 3 people living in poverty ○ 1 in 7 rural residents ● Health Centers provided care for: <ul style="list-style-type: none"> ○ 1.4 million people experiencing homelessness ○ 8.8 million children ○ 400,000 veterans ○ 3.5 million patients over 65 |

Figure 5-2

Health Center Care Team Staff Provide a Broad Array of Services

Total Care Team: 164,771 Full-Time Equivalent (FTE) Employees

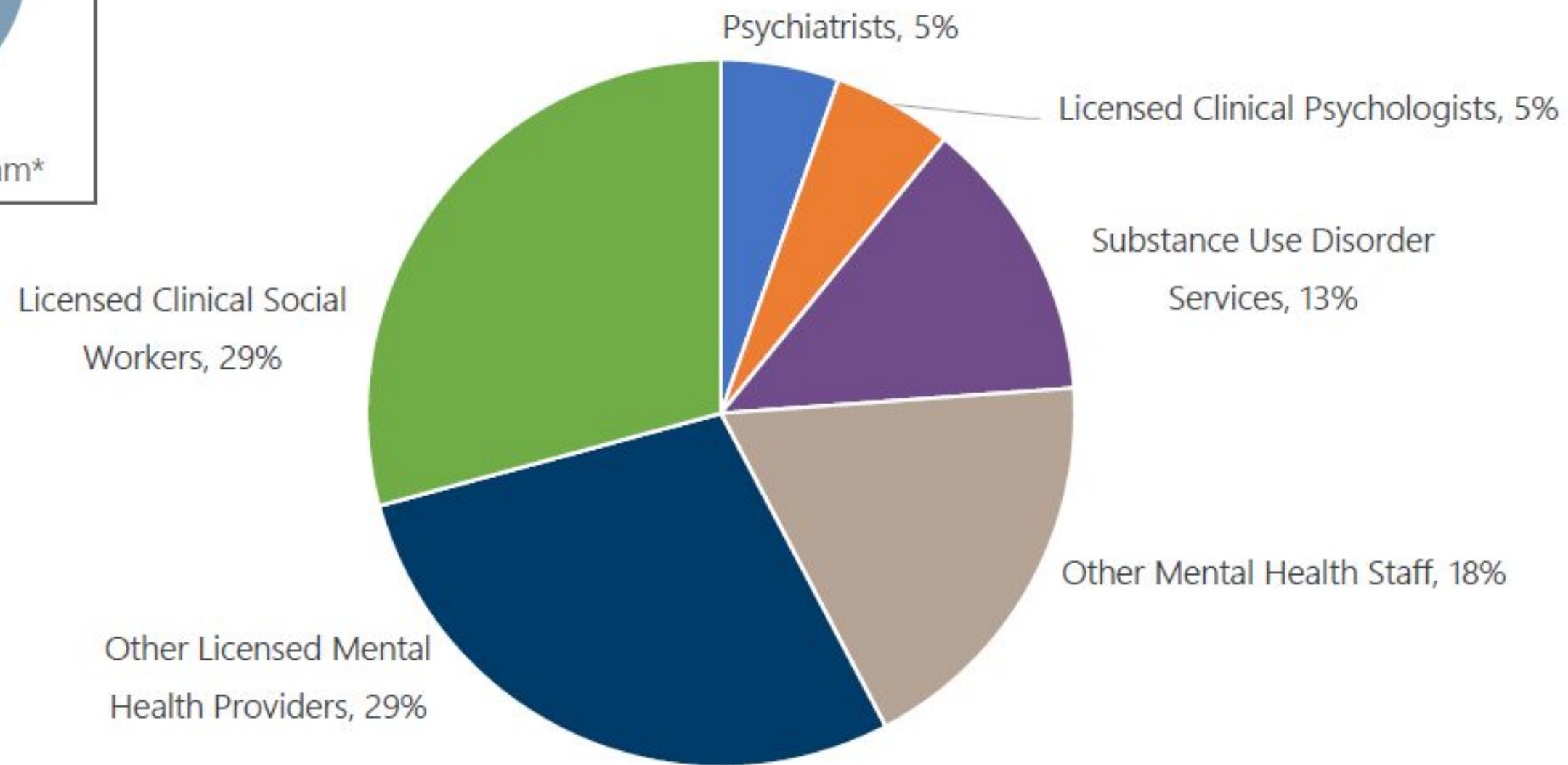
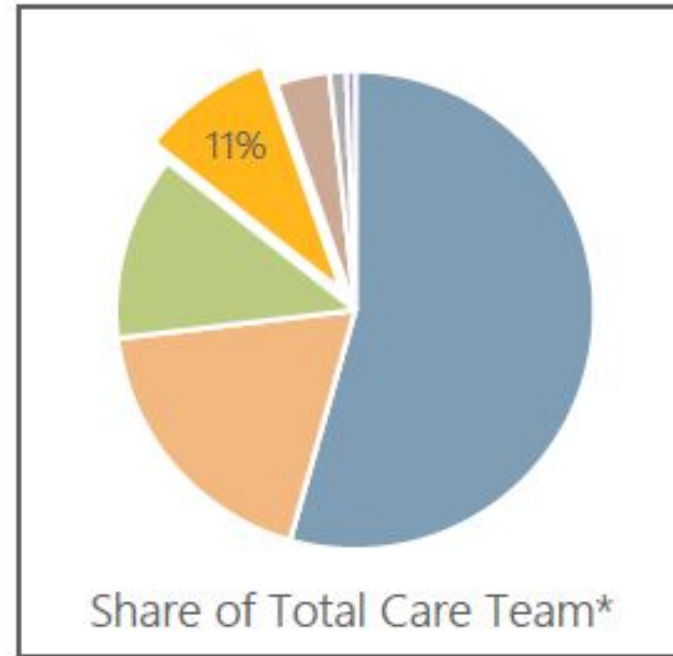


Source: 2021 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.

Figure 5-10

Health Center Behavioral Health Staff

Total: 17,415 Full-Time Equivalent



*Behavioral Health Staff represent 11% of the Total Care Team, shown in Figure 5-2.
Note: Percentages may not add to 100% due to rounding.
Source: 2021 Uniform Data System. Bureau of Primary Health Care, HRSA, DHHS.

MLP

How civil legal aid fits within a health center's response to SDOH?

SOCIAL DETERMINANTS OF HEALTH

are broadly defined by the World Health Organization as the conditions in which people are born, grow, work, live, and age. These circumstances are shaped by economic and social policies, political systems, and social norms, and they contribute significantly to health disparities.

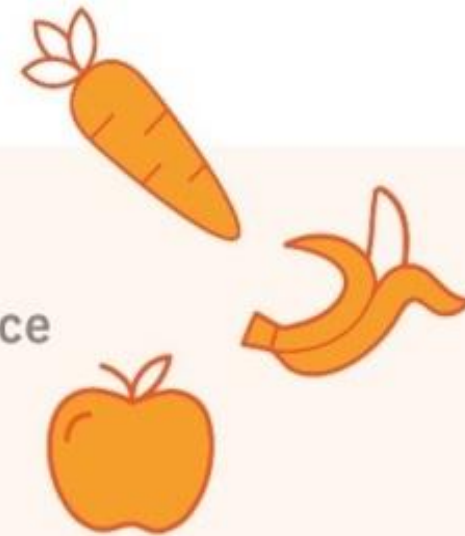
A food desert



SOCIAL NEEDS

are the more immediate, individual needs that patients enter the health center with every day as a result of social determinants of health.

A family's need for fresh produce today



LEGAL NEEDS

are, simply put, the subset of social needs that have legal solutions. The distinction in this guide is made to help health centers understand where lawyers can be helpful*.

A family's need to file an appeal after their SNAP benefits are incorrectly cut



Almost **90%** of a person's health is determined by social **factors**.

Legal Determinants of Health

- **Law is a powerful determinant of health impacting individual and population health outcomes;** however, access to civil legal services in the U.S. is limited.
- Approximately 66% of people in the U.S. will experience at least one justiciable event within two years.
- Health consequences of experiencing a justiciable event include negative emotions (55%), negative impacts on mental health (39%), and negative influences on physical health (23%).

Access the report:

medical-legalpartnership.org/mlp-resources/health-centers-and-courts/

CONNECTING COMMUNITY

HEALTH CENTERS & COURTS

TO IMPROVE BEHAVIORAL

HEALTH OF PEOPLE &

COMMUNITIES

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AT THE GEORGE WASHINGTON UNIVERSITY



Legal Determinants of Health

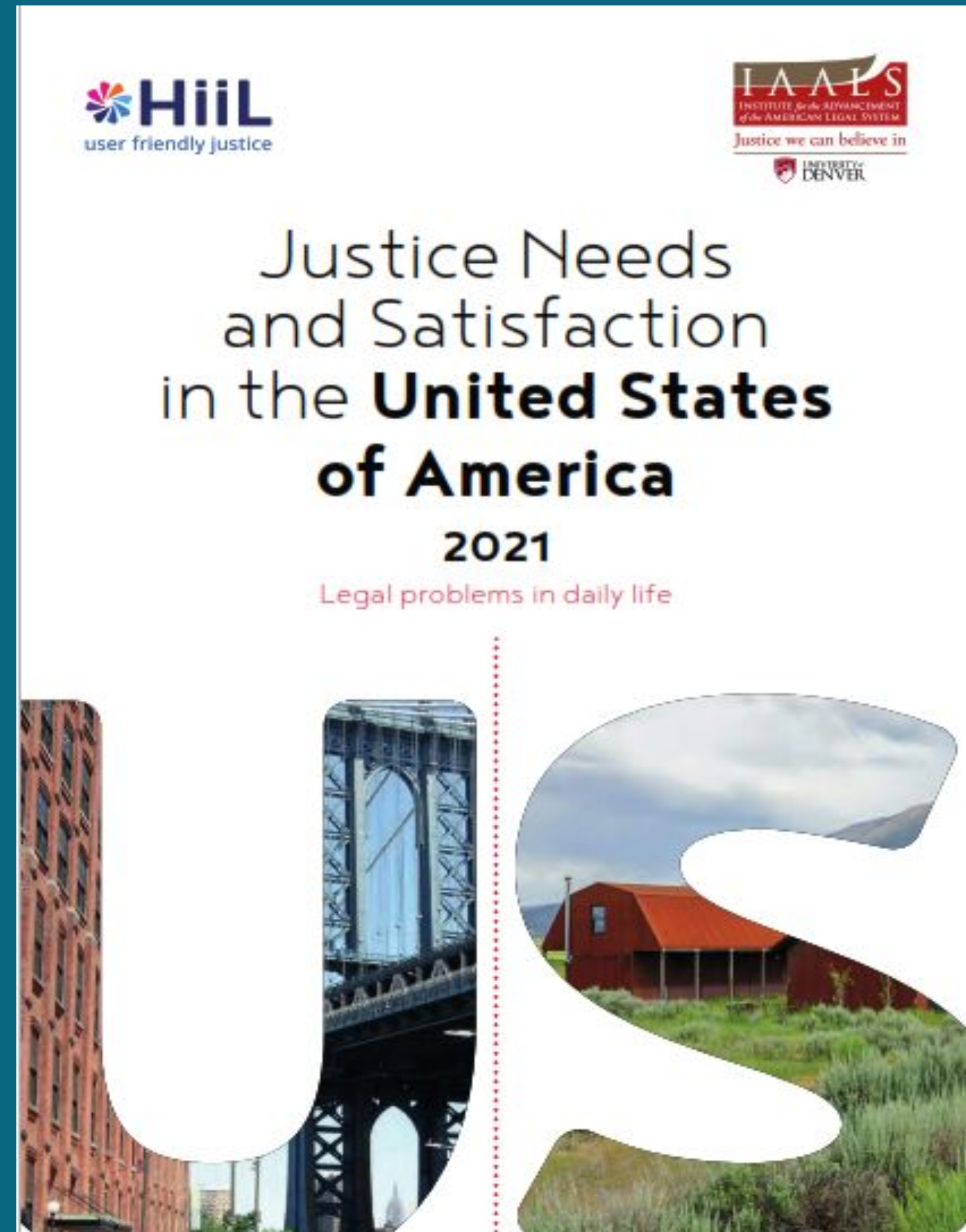
- Most people do nothing or try to resolve on their own
- People reach out to friends & family as much as professionals for help
- Seek help from trusted sources
- People connect to legal services by a personal recommendation (CLIO, 2019)



See our NCMLP webinar recording for “[Health Center & Justice System Collaboration to Improve Mental Health](#)” featuring SMEs James Teufel, Shannon Mace, and Patty Tobias.

Access the report:

<https://iaals.du.edu/publications/justice-needs-and-satisfaction-united-states-america>



What is the Medical-Legal Partnership (MLP) Approach?

Civil legal aid is the assistance of counsel and legal advocacy for people living at or near poverty in legal matters that fall outside of the criminal justice system.

Medical-Legal Partnership (MLP) is an **intervention** where legal and health care professionals **collaborate** to help patients resolve **social, economic, and environmental factors** that contribute to **health disparities** and have a **remedy in civil law**.

The MLP approach is a flexible, evidence-based, public health, and social justice intervention designed to meet the needs of the community.

Core MLP activities include:

Legal Assistance

to address patients' social needs & help the health center workforce operate at "top of license"

Training

to build knowledge, capacity & skills that strengthen the health center workforce's response to SDOH

Clinic-Level Changes

that leverage legal expertise to shape clinical practices to address many patients' needs at once

Policy Change Strategies

that advance healthy regulatory, administrative, & legislative policy solutions for whole communities

What are the Basic Components of a Medical-Legal Partnership?

1

“Lawyer in residence”



2

Formal agreement b/t health & legal orgs



3

Target population



4

Patients screened for legal needs



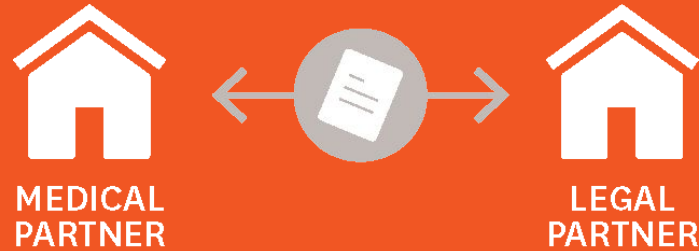
8

Designated resources



7

Information-sharing



6

Training on SDOH



5

Legal staffing



How Legal Services Help Health Care Address the Social Determinants of Health (I-HELP™)

Common SDOH

How Legal Services Can Help

Impact of Legal Services on Health / Health Care

INCOME & INSURANCE

Resources to meet daily basic needs



- Appeal denials of food stamps, health insurance, cash benefits, and disability benefits

- Increasing someone's income means s/he makes fewer trade-offs between affording food and health care, including medications.
- Being able to afford enough healthy food helps people manage chronic diseases and helps children grow and develop.

HOUSING & UTILITIES

A healthy physical environment



- Secure housing subsidies
- Improve substandard conditions
- Prevent evictions
- Protect against utility shut-off

- A stable, decent, affordable home helps a person avoid costly emergency room visits related to homelessness.
- Consistent housing, heat and electricity helps people follow their medical treatment plans.

EDUCATION & EMPLOYMENT

Quality educational and job opportunities



- Secure specialized education services
- Prevent and remedy employment discrimination
- Enforce workplace rights

- A quality education is the single greatest predictor of a person's adult health.
- Consistent employment helps provide money for food and safe housing, which also helps avoid costly emergency health care services.
- Access to health insurance is often linked to employment.

LEGAL STATUS

Access to jobs



- Resolve veteran discharge status
- Clear criminal / credit histories
- Assist with asylum applications

- Clearing a person's criminal history or helping a veteran change their discharge status helps make consistent employment and access to public benefits possible.
- Consistent employment provides money for food and safe housing, which helps people avoid costly emergency health care services.

PERSONAL & FAMILY STABILITY

Safe homes and social support

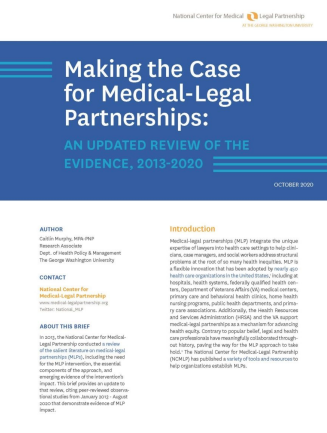


- Secure restraining orders for domestic violence
- Secure adoption, custody and guardianship for children

- Less violence at home means less need for costly emergency health care services.
- Stable family relationships significantly reduce stress and allow for better decision-making, including decisions related to health care.

Literature Review: Emerging Evidence of the Impact of Medical-Legal Partnerships (2013-2020)

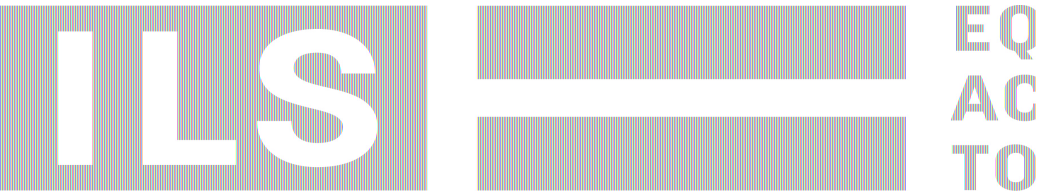
| Outcome | Examples from the Literature |
|--|--|
| <p>Changes in the health and well-being of patients</p> | <p>Patients report less stress and mental health improvement. Patients more commonly comply with medical treatment. Patients have improved health outcomes. Adults and children have fewer ED visits.</p> |
| <p>Improved housing and utility stability among patients</p> | <p>Patients experience improved housing status. Utility shut-offs are prevented.</p> |
| <p>Improved access to financial resources among patients</p> | <p>Patients are able to secure, retain, or recover financial benefits. Patients are able to access resources to meet their basic needs.</p> |
| <p>Improvements to health care systems and workforce</p> | <p>Families are more successful at navigating complex service systems. Patients are better able to connect with a medical home. Clinicians experience improved ability to perform at the top of their license.</p> |
| <p>Improvements in policies, laws, and regulations</p> | <p>Children are able to access at-home care. Elimination of hurdles to life saving medication.</p> |



Read the full literature review:
<https://medical-legalpartnership.org/download/literature-review-2013-2020/>

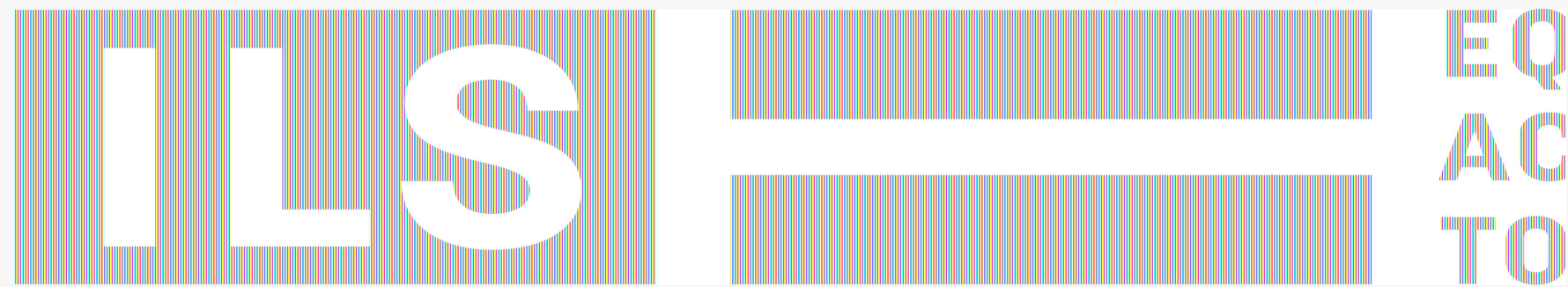
Roadmap

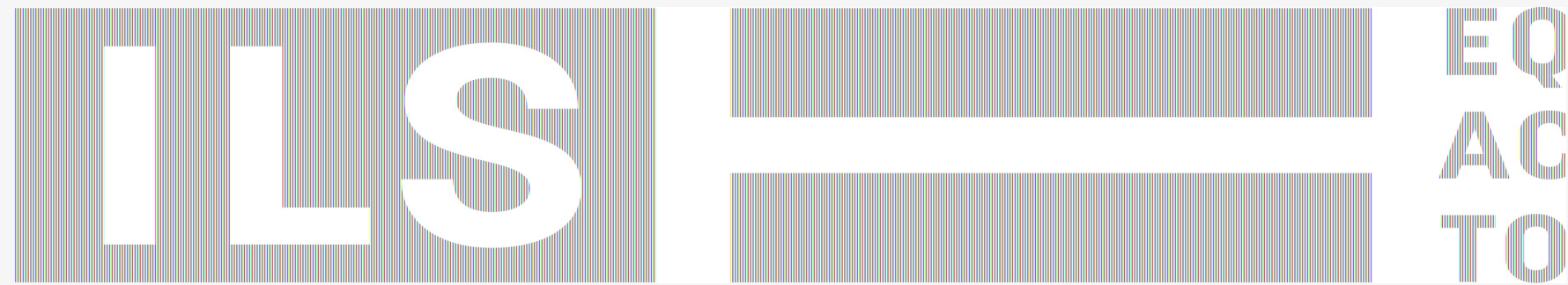
**Who are ILS
and Eskenazi
Health**



Our Mission

Indiana Legal Services
uses the law to fight
poverty and racism,
empower clients, and
improve access to justice.





- Indiana Legal Services (ILS) is a statewide nonprofit law firm with 8 regional offices and special projects that serve all of Indiana's 92 counties.
- We have MLP projects throughout the State of Indiana with most of our projects being housed in our Central Indiana Medical-Legal Partnership Project.
- Our MLP projects closed more than 1200 cases last year. The top three case types we handle are housing (25% of cases), advance directives/estate Planning (20%), and family law (18%).



ESKENAZI
HEALTH

- Eskenazi Health is part of the Health & Hospital Corporation of Marion County and serves as Indianapolis's safety-net health system.
- It has an urban hospital campus, several community mental health centers, and a federally qualified health center with 12+ primary care sites.

SANDRA ESKENAZI
MENTAL
HEALTH
CENTER

ESKENAZI HEALTH

[Sandra Eskenazi Mental Health Center](#), Indiana's first community mental health center, provides inpatient and outpatient comprehensive care for all types of emotional and behavioral health conditions, including severe mental illness, substance abuse, and personality disorders.

Sandra Eskenazi Mental Health Center's philosophy of care stresses strength-based and family- and community-centered treatment utilizing the Recovery Model of treatment.

Roadmap

**How the Sandra
Eskenazi Mental
Health MLP
Operates**

SANDRA ESKENAZI
**MENTAL
HEALTH
CENTER**
ESKENAZI HEALTH

How Patients Access the MLP

Referral from a Healthcare Provider

- Healthcare Provider Recommends or the Patient Requests
- Electronic Medical Record
- Provided Office Hours Information

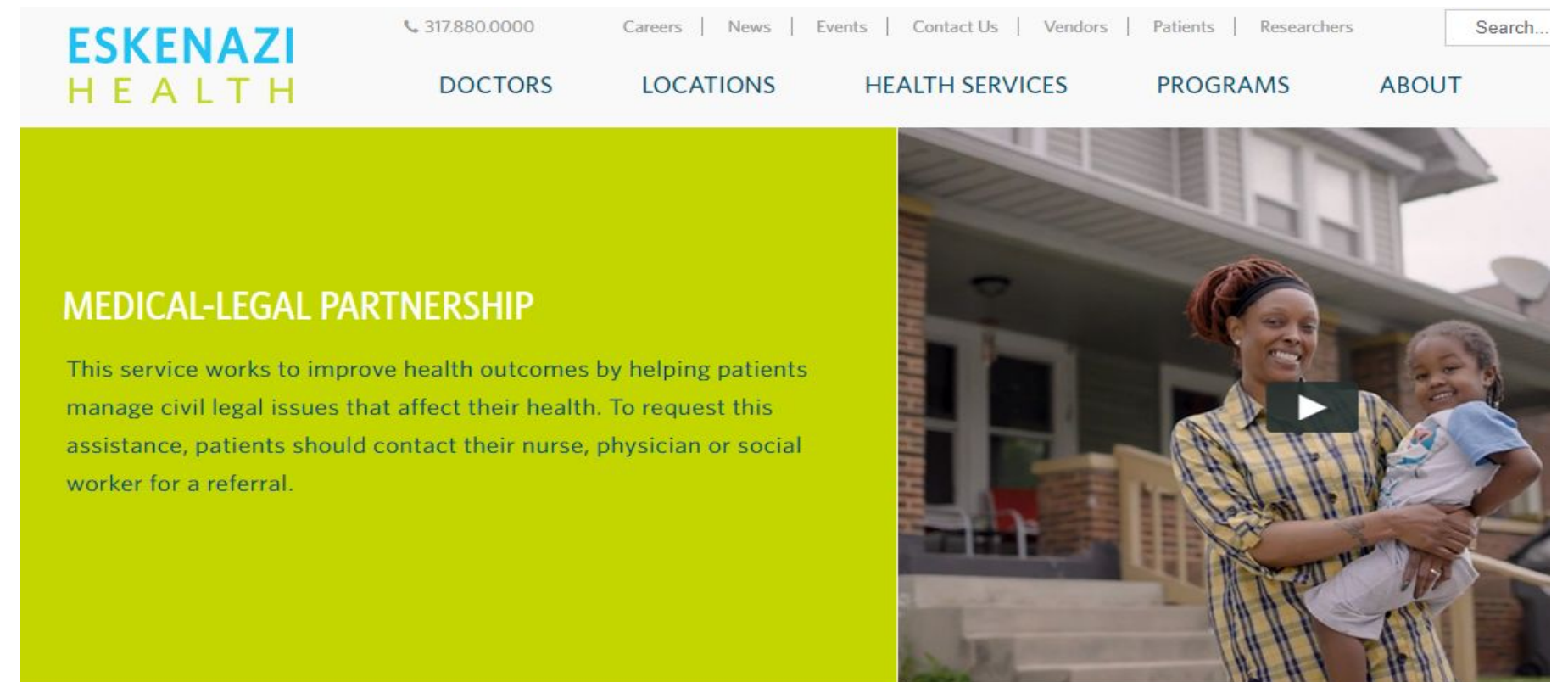
Walk-In During MLP Office Hours On-Site

- MLP Lawyer and Paralegal On-Site
- 3-Hour Office Hours
- Intake for New Patient-Clients
- Meet with Existing Patient-Clients

Sandra Eskenazi Mental Health and Indiana Legal Services

Medical-Legal Partnership Scope of Services

- Housing
- Gender marker changes/name changes
- Expungement
- Consumer rights
- Immigration
- Family stability
- Benefits
- Education law
- Decision-making
- Guardianship



The screenshot shows the top navigation bar of the Eskenazi Health website. The logo "ESKENAZI HEALTH" is on the left. To the right, there is a phone number "317.880.0000" and a list of links: "Careers | News | Events | Contact Us | Vendors | Patients | Researchers". A search bar is on the far right. Below the navigation bar, there are menu items: "DOCTORS", "LOCATIONS", "HEALTH SERVICES", "PROGRAMS", and "ABOUT". The main content area has a green background on the left with the heading "MEDICAL-LEGAL PARTNERSHIP" and a paragraph: "This service works to improve health outcomes by helping patients manage civil legal issues that affect their health. To request this assistance, patients should contact their nurse, physician or social worker for a referral." On the right, there is a video player showing a woman holding a child in front of a house.

Finding the Missing Piece of the Puzzle: How Patients Benefit from the MLP

- Research tells us that many people have 4 or more unmet legal needs at any given time.
- Research also tells us that many people are unaware that their issues, which are often significant stressors, are legal issues or where to turn for help.
- MLP legal services are free civil legal services, and, with the help of our healthcare partner, the MLP helps to connect the patient with available resources to help them on their journey to sustained, healthy well-being.
- Patients are able to better understand their legal issues and their legal rights.
- The stress caused by unmet legal needs is reduced, and, through successful MLP interventions, personal stability is restored.

Roadmap

**Why Having Access to
an MLP is a Necessary
Component of Public
Health: Case Studies**

Case Example – Eviction Avoidance and More...

What can an MLP do for this patient in crisis?

Housing at Risk

- Patient lives in Section 8 housing and has their paid rent with the assistance of their Social Security Rep. Payee.
- Due to an error, the rent payments were sent to the wrong address.
- After several months of not receiving rental payments, the landlord filed for eviction.
- The patient is now facing a severe impact on their health and safety through eviction, immediate homelessness, and loss of their Section 8 voucher through the local public housing authority.

**What steps did the MLP take to help
this patient in crisis?**

The healthcare staff referred the patient to the MLP. The healthcare team recognized the legal issue, the potential effect on the patient and the benefit of involving the legal team.

The MLP Attorney assigned to the case worked with the public housing authority, the patient's Social Security representative payee, the healthcare partner, and opposing counsel to negotiate an agreed settlement to pay all past rent owed.

A payment plan was established with the landlord ensuring all future rent payments were sent to the proper destination.

The MLP Attorney worked closely with healthcare staff to obtain funds reserved by the healthcare provider to assist Patients in financial need, i.e. paying Patient's outstanding balance to the landlord.

The MLP Attorney attended the Patient's eviction hearing and subsequent compliance hearings to ensure the Court was advised of the ongoing negotiations and final settlement.



Through the agreed settlement, the Patient was able to pay all back rent and late fees owed (minus some late fees the MLP Attorney was able to cancel through the negotiations) and the eviction was dismissed and sealed.

Housing Saved

With the help of the MLP, the Patient:

- remained in their home,
- received assistance to satisfy the unpaid balances,
- removed the eviction from their record, and
- obtained future housing stability and a secured housing subsidy.

Upcoming Poll Question

How can the MLP team help this patient?

- A. The healthcare provider can do a social driver of health assessment to determine whether there is an unmet legal need.
- B. The healthcare provider can make a referral to the MLP legal aid attorneys, providing the patient with the benefit of knowing their legal rights.
- C. The MLP team (the legal aid staff and the healthcare partner) can work together to ensure the patient has access to information on available resources that can help the patient meet their additional needs.
- D. All of the above.

Case Example – A Fresh Start

How can an MLP help this patient obtain a fresh start?

Income and Housing Insecurity

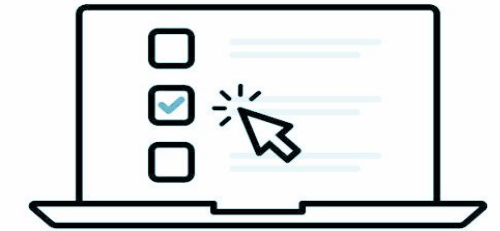
- The patient is unable to secure adequate employment because of their past criminal record and was living in a perpetual state of financial uncertainty.
- The patient is unable to find gainful employment and stable housing due to the conviction that happened long ago.

Poll Question

How can the MLP team help this patient?

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- D. All of the above.

Poll



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- D. All of the above.**

A Fresh Start

The MLP healthcare team member referred the patient to the MLP legal aid attorney and connected the patient with resources to help with meeting their basic needs.



The MLP attorney reviewed the patient-client's criminal history and determined that the patient's convictions were eligible for expungement and a waiver of old fees.



The MLP Attorney filed for fee waivers and petitioned to have the convictions expunged.



The patient-client now has a fresh start and is now better equipped to access stable employment and housing.

Please submit questions using the **Q&A function.**



Happening Soon!

Join us for the final session of the series:

MLP in Action Webinar Series (Part 6): Advancing Health Equity for Patients Impacted by the Criminal Justice System, **April 30, 2024 (2-3 PM ET)**

Also, join us next week for:

Health Center MLP Planning, Implementation & Practice Webinar Series: How to Develop a Strong Memorandum of Agreement for a Medical-Legal Partnership, **April 18, 2024 (1-2.30 PM ET)**

Subscribe to our newsletter, the MLP Update, to register for upcoming learning opportunities:

bit.ly/mlpnews



Thank you!

Please take a moment to fill our short evaluation survey

<https://www.surveymonkey.com/r/LJ89MDL>

A link to the survey is also in the chat



Resources

- Gostin, Lawrence O , Monahan, John T, Kaldor, Jenny, et. al., The Legal Determinants of Health: Harnessing the Power of Law for Global Health and Sustainable Development, *Lancet* 2019; 393: 1857–910, Published Online, April 30, 2019, [http://dx.doi.org/10.1016/S0140-6736\(19\)30233-8](http://dx.doi.org/10.1016/S0140-6736(19)30233-8). Also available at: [https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736\(19\)30233-8.pdf](https://www.thelancet.com/pdfs/journals/lancet/PIIS0140-6736(19)30233-8.pdf) (Last accessed 4/4/2024).
- Schram A, Boyd-Caine T, Forell S, Baum F, Friel S. Advancing Action on Health Equity Through a Sociolegal Model of Health. *Milbank Q.* 2021 Dec;99(4):904–927. doi: 10.1111/1468-0009.12539. Epub 2021 Oct 5. PMID: 34609023; PMCID: PMC8718588. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8718588/> (Last accessed 4/4/2024).
- Jay Chaudhary, Kate Marple, & Jillian Bajema, How Medical-Legal Partnership Services Can Help Address the Opioid Crisis, The National Center for Medical-Legal *Partnership Medical-legal partnership series issue brief 1*, 2018 March. <https://medical-legalpartnership.org/wp-content/uploads/2018/02/MLP-and-the-Opioid-Crisis.pdf> (Last accessed 4/4/2024).
- Bent Weber, Samantha and Pepin, Dawn, Why Law is a Social Determinant of Health, *Stetson Law Review*, vol. 4 issue 3, 2021 April. <https://www2.stetson.edu/law-review/article/why-law-is-a-determinant-of-health/> (Last accessed 4/4/2024).
- Legal Services Corporation, The Justice Gap: The Unmet Civil Legal Needs of Low-income Americans, 2022 April. <https://justicegap.lsc.gov/the-report/> (Last accessed 4/7/2024).
- Legal Servs. Corp., Strengthening the Role of Civil Legal Aid in Responding to the Opioid Epidemic: Report of the LSC Opioid Task Force (June 2019), <https://lsc-live.box.com/s/7f9qgh5hjpdq4z0ldt00ozlexwk9sqhd>. (Last accessed 4/7/2024).

THE OPIOID CRISIS IN AMERICA & THE ROLE MEDICAL-LEGAL PARTNERSHIP CAN PLAY IN RECOVERY



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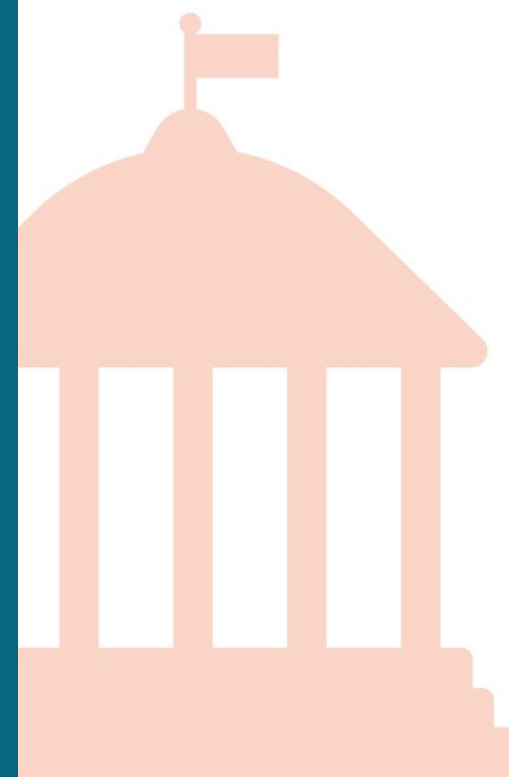
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CONNECTING COMMUNITY HEALTH CENTERS & COURTS TO IMPROVE BEHAVIORAL HEALTH OF PEOPLE & COMMUNITIES



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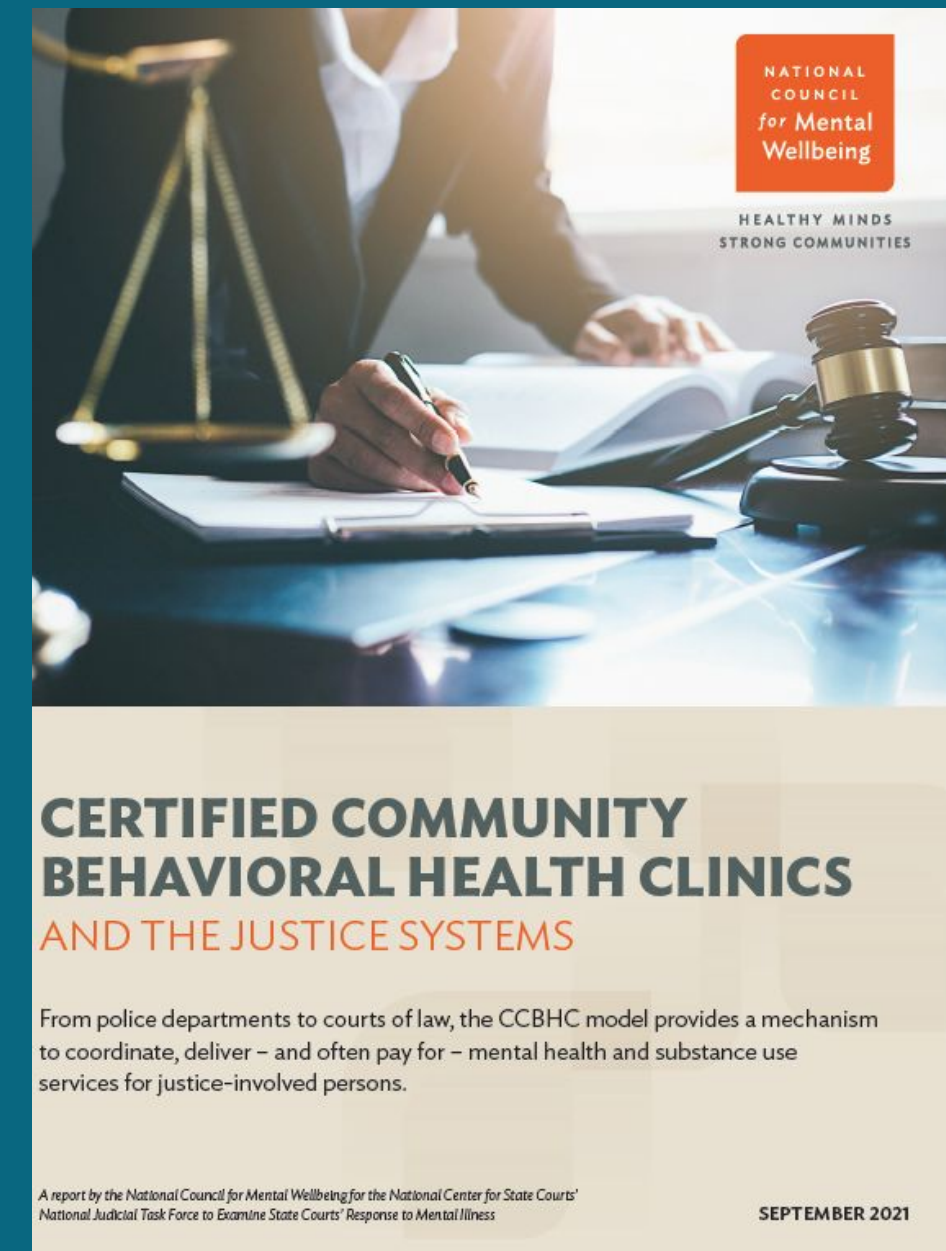
The Health Center MLP Toolkit

National Center for Medical-Legal Partnership



Certified Community Behavioral Health Clinics and the Justice Systems

National Council for Mental Wellbeing



Request for Information:

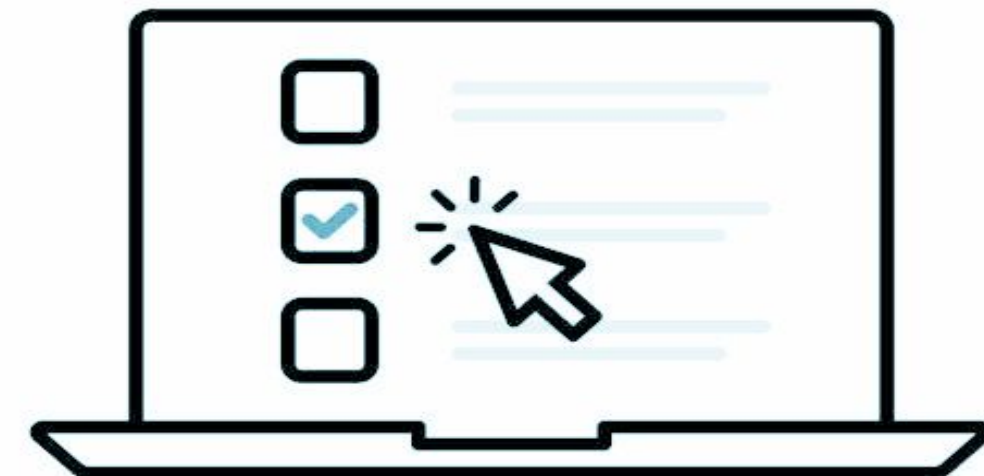
The National Center for Medical-Legal Partnership is seeking feedback and information for the initiatives listed below. We thank you in advance for your time and consideration!

MLPs and Certified Community Behavioral Health Clinic (CCBHC) RFI

<https://www.surveymonkey.com/r/MLPCCBHC24>

MLP Update feedback survey

<https://www.surveymonkey.com/r/LWY5Y75>



Join HRSA'S Black Maternal Health Week Campaign

Black Maternal Health Week 2024
Partnering for progress

#BMHW24

#HRSAhelpsMoms



Black Maternal Health Week (April 11-17) is an opportunity for us to focus the spotlight on the critical issue of Black maternal health. Use HRSA's toolkit and join their social media campaign [[#BMHW](#) | [#HRSAhelpsMoms](#)] to showcase your work. The toolkit includes:

- A website banner
- A virtual meeting background
- Social media graphic cards with written messaging content

These resources can help you elevate your work, partnerships, and accomplishments. Access the [toolkit on HRSA](#).

Resources

BPHCCurates

BPHC has released a [new curated BPHCCurates packet of technical assistance \(TA\) materials, Health Center Safety and Man-Made Threats](#). The linked TA materials provide strategies to address mitigation, preparedness, response, and recovery strategies related to the topics of: health center security, population specific safety concerns, and cybersecurity threats. All the resources included in this packet are available free of charge and have been screened by BPHC staff for quality.

BPHCCurates: Health Center Safety and Man-Made Threats Resource Packet Targeted Resources on Health Center Security, Population-Specific Safety Topics, and Cybersecurity

The Bureau of Primary Health Care (BPHC) invests in technical assistance (TA) to support health center clinical, operational, and fiscal excellence. To support the access and utilization of TA resources developed by BPHC-funded TA providers, BPHC staff curate TA resources for in-demand topics into packets, recognizable under the BPHCCurates brand. Resources in BPHCCurates packets are developed by a range of BPHC-funded TA providers that include Health Center Controlled Networks (HCCNs), National Training and Technical Assistance Partners (NTTAPs), Primary Care Associations (PCAs), and Emergency Care Institute Research (ECRI).

This BPHCCurates packet provides resources describing mitigation, preparedness, response, and recovery strategies for navigating man-made threats directed towards health centers, their staff, and patients. The man-made threats included in this packet are specifically related to [health center security](#), [population-specific safety concerns](#), and [cybersecurity](#).

Health Center Security

Title: [Health Center Operations Resource Packet: Sample Internal Guidance for Handling Unauthorized Individuals at Health Center Locations](#)

Author: National Association of Community Health Centers / NTTAP

This packet provides guidance from health centers that have recently experienced interactions with self-identified “First Amendment Auditors” or “Citizen Journalists” attempting to record confrontations with health center staff regarding federal funding and public access to a health center.

Title: [Safety and Security Series: The Basics](#)

Author: National Health Care for the Homeless Council / NTTAP

Safety and security are primary concerns for both patients and staff of health centers serving people experiencing homelessness. This course offers strategies for health center professionals to plan for, recognize, and implement actions that decrease facility vulnerability and increases the personal awareness and safety of staff and patients.