

MLP IN ACTION WEBINAR SERIES (PART 1):

UNDERSTANDING AND ADDRESSING THE HEALTH-RELATED LEGAL NEEDS OF OLDER ADULTS AND THEIR FAMILIES

March 26, 2025 | 2.30 PM ET



MEET OUR MODERATOR



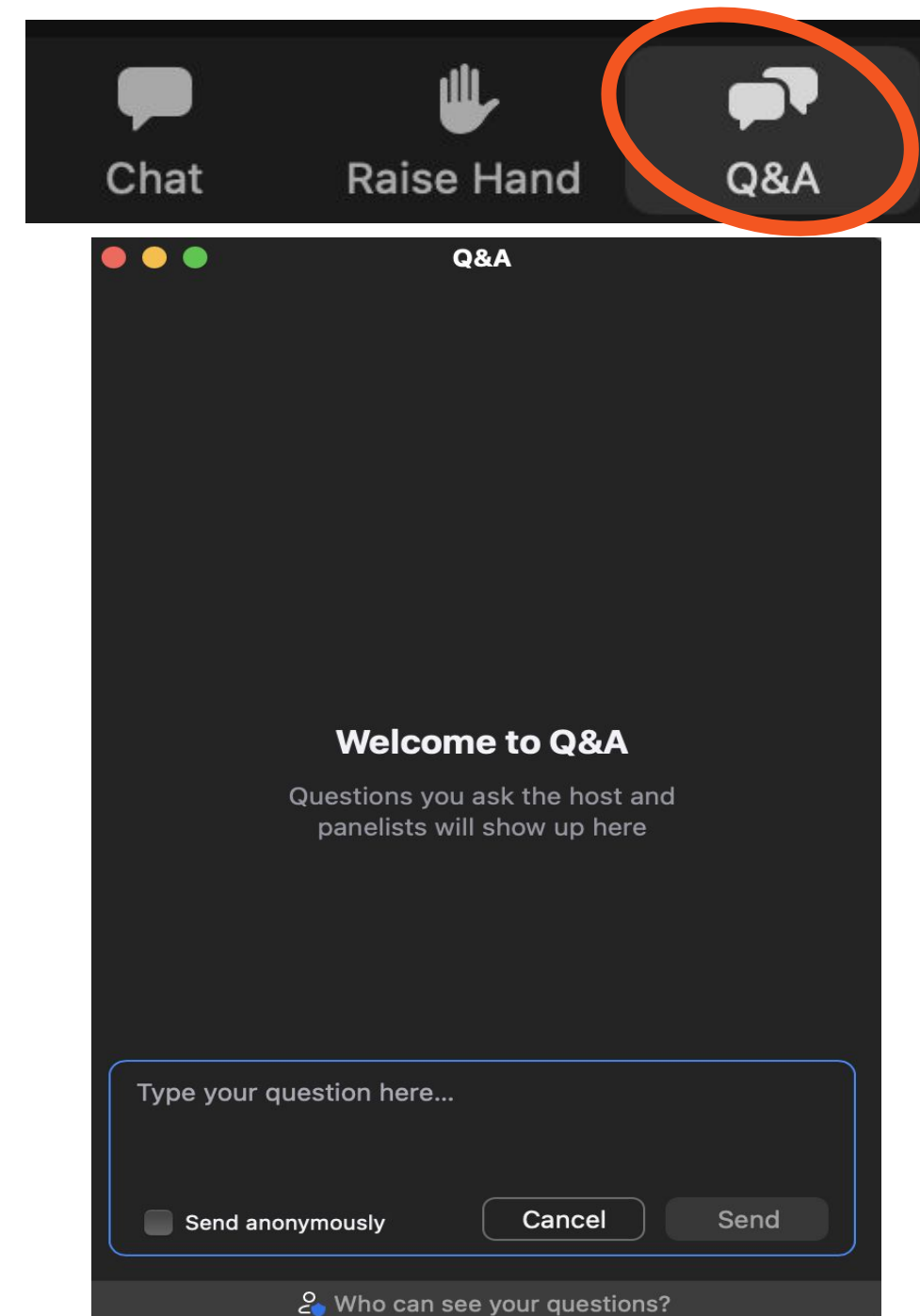
Bethany Hamilton, JD

Director

National Center for Medical-Legal Partnership (NCMLP)

Housekeeping

1. Attendees are muted throughout the webinar.
2. Type questions into **Chat or Q&A** pane.
3. Send a chat to the **Hosts & Panelists** for help.
4. To activate captions, select “**Live Transcript**” and “**Show Subtitle.**”
5. This webinar will be recorded and shared at medical-legalpartnership.org/resources/





Health Resources & Services Administration

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award to the National Center for Medical-Legal Partnership totaling \$550,000 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do **not** necessarily represent the official views of, nor an endorsement by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov).

Learning Objectives:

1. Name 2-3 health-related legal needs of older adults
2. Describe the costs and consequences to patients, caregivers, and health systems when they aren't addressed
3. Articulate 4 strategies medical-legal partnerships can use to intervene
4. Identify free resources to support these strategies

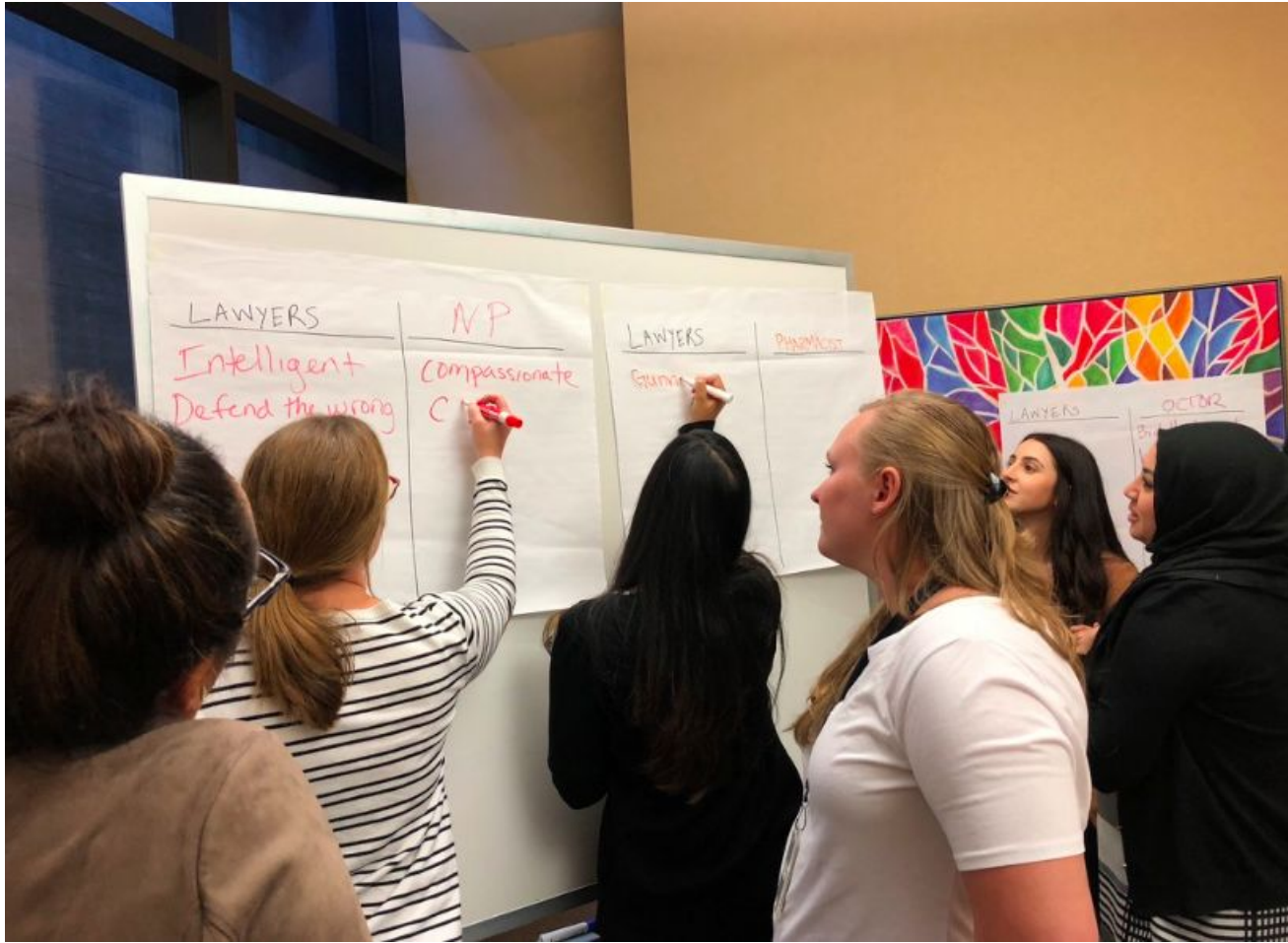
MEET OUR SPEAKER



Sarah M. Hooper J.D.

Professor of Practice and Executive Director
UCSF-UC Law SF Consortium on Law, Science &
Health Policy

About the Medical-Legal Partnership for Seniors in San Francisco



UCSF-UC Law Medical-Legal Partnership for Seniors

Multidisciplinary Workforce Training



Geriatrics Workforce Enhancement Program (GWEP)



California Statewide Dementia Care Aware Medical-Legal Learning Network





Care Ecosystem Clinical Trial

Possin et al (2019):

- Randomized-controlled trial
- 1560 participants in CA, NE, IA
- Improvements in quality of life
- Reduced ER visits
- Reduced caregiver burden and depression

Figure 2. The Care Ecosystem Model



PREPARE Advance Care Planning Tool

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1. Have a voice in **YOUR OWN** medical care
2. Help **OTHER PEOPLE** with their medical planning and decisions

Have a Voice In Your Medical Care

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Click here to do [YOUR OWN](#) medical planning

Help Other People

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New!

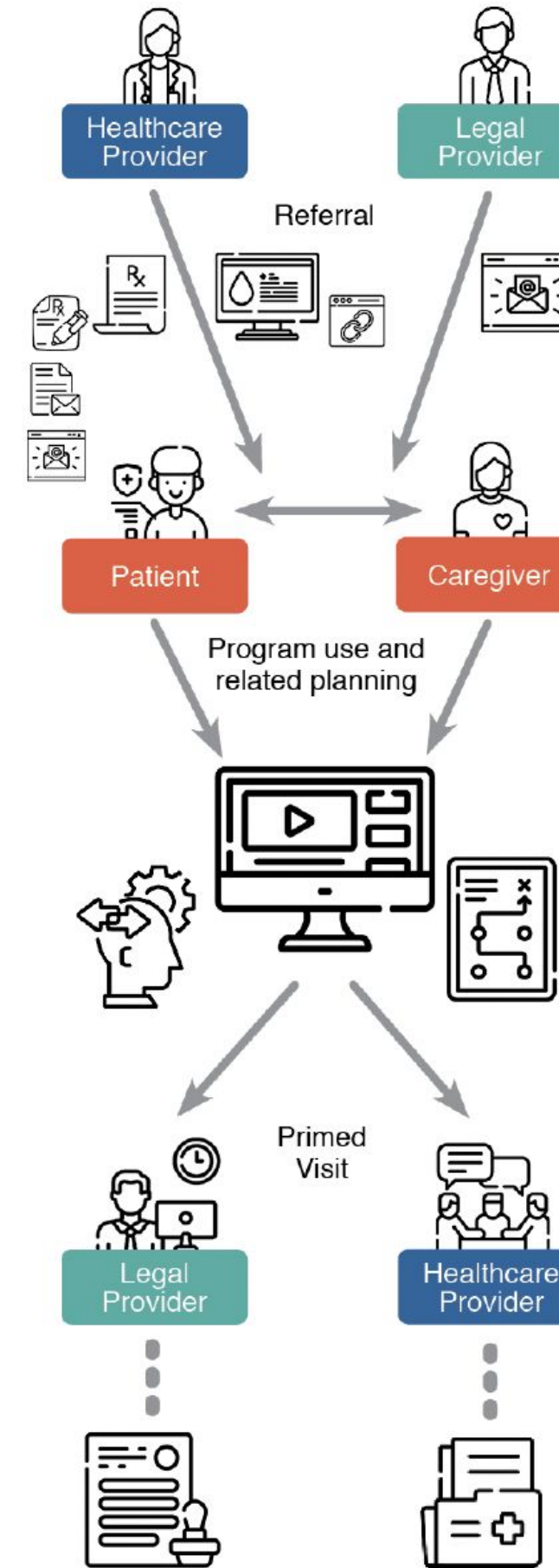


[PREPARE Tools for Providers & Organizations](#)

[Free PREPARE Easy-to-Read Advance Directives Below](#) ▼

Plan for Clarity: Legal and Financial Care Planning

Figure 2: Clarity Overview



MLPS Individual Patient/Client Advocacy

Health care providers:

- UCSF Health
- San Francisco Veterans Administration
- San Francisco Health Network

Patient/clients:

- 67% socially isolated
- 60% at risk of institutionalization
- 59% at or below 200% FPL



What Are Health-Related Legal Needs of Older Adults?

Case: Mrs. Chase



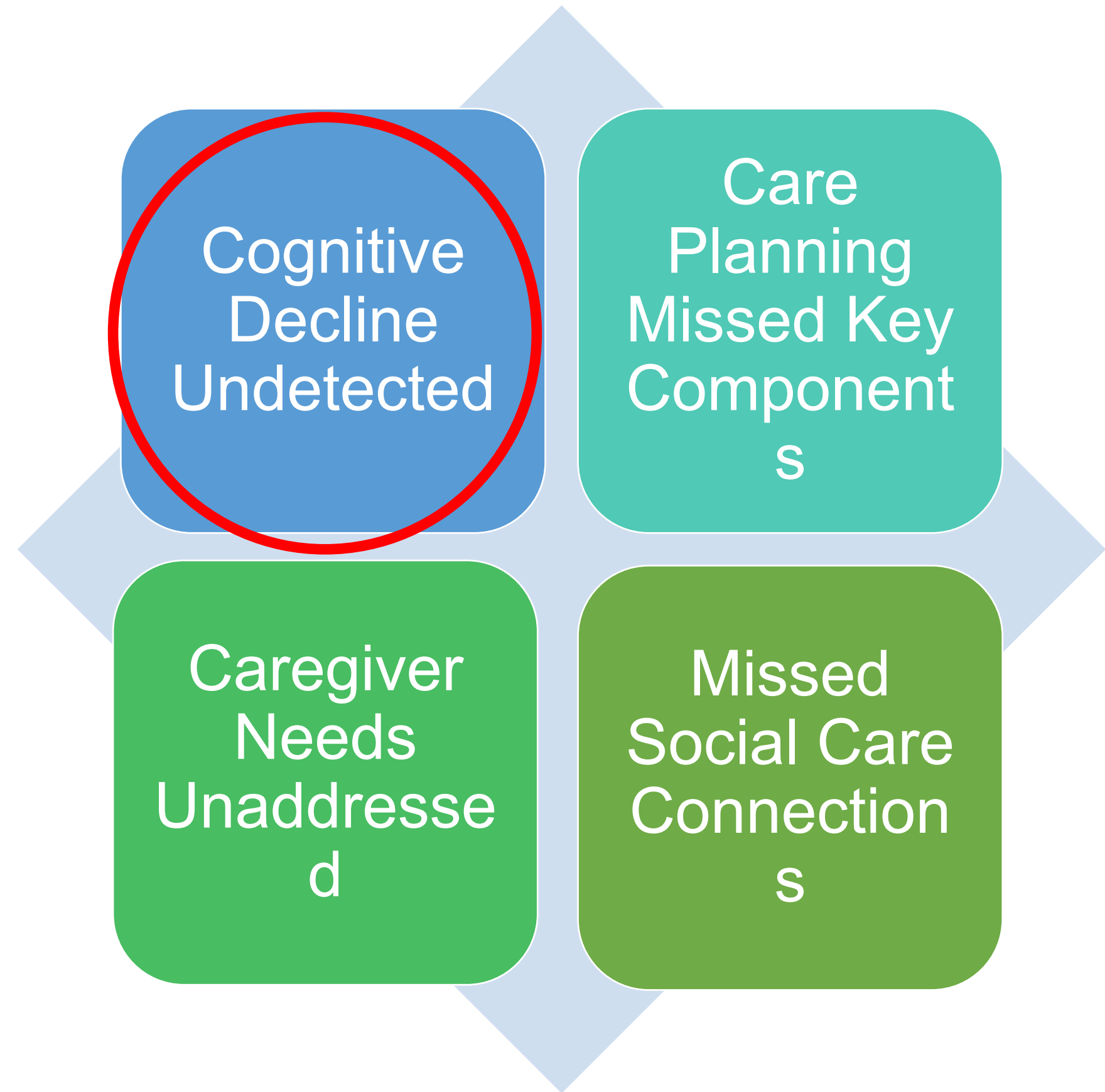
- 82 y/o woman
- Multiple hospitalizations and ED visits in the past 6 months, primarily for UTI and dehydration.
- Daughter Miriam is primary caregiver
- Tenants in an apartment in low-income neighborhood
- Miriam works an hourly job, significant caregiver burden

Months later...



- Mrs. Chase hospitalized after wandering
- Dementia diagnosis
- Miriam doesn't have DPOA authority
- Assisted living refuses to take Mrs. Chase
- Discharge team advises Miriam she needs to file for probate conservatorship
- Miriam balks at this; discharge team considers possibility of elder neglect, public guardian referral
- Conservatorship: 6 months to a year

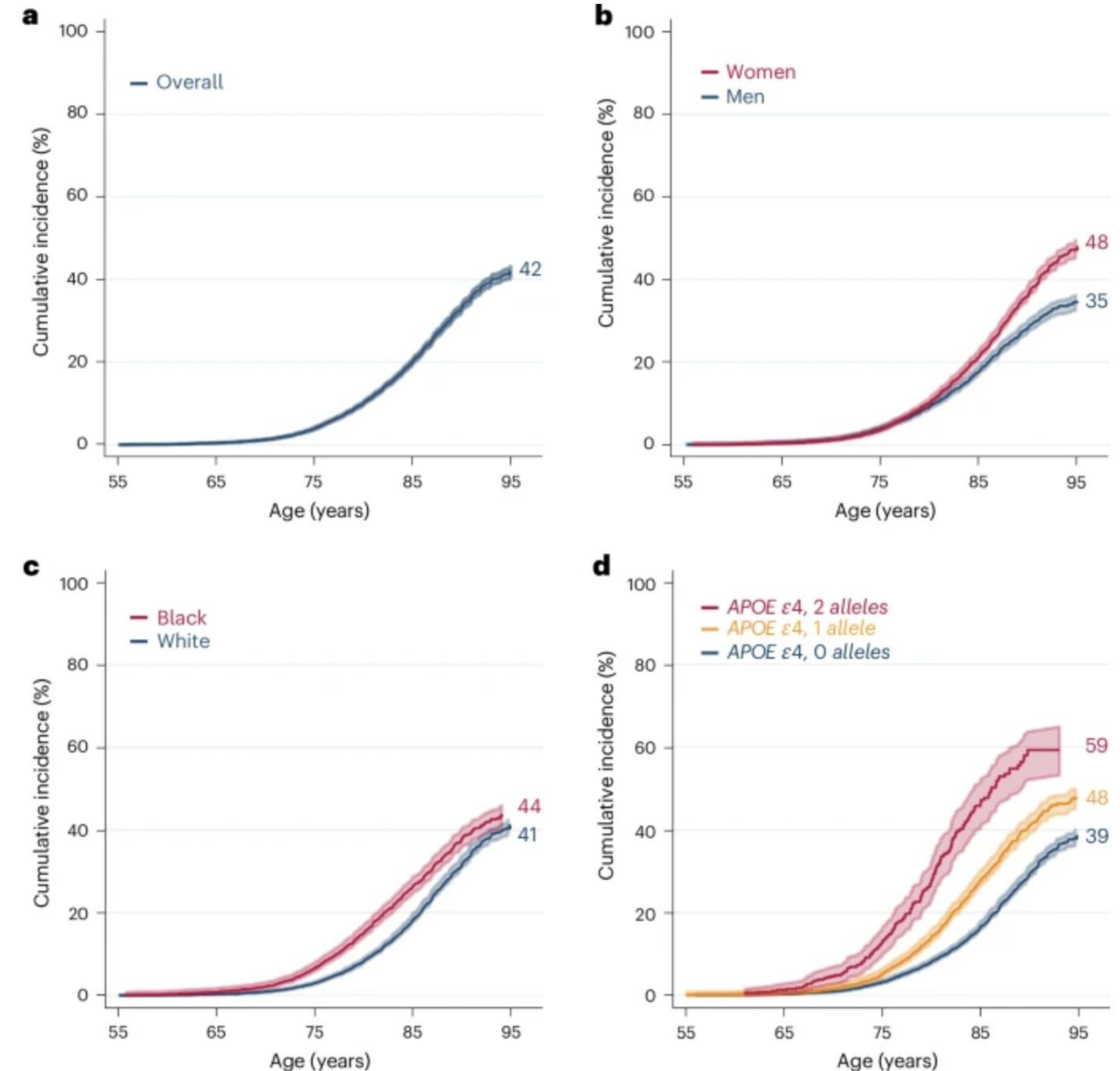
What Were the Unmet Medical, Legal and Other Related Needs?



Dementia

- Not a “natural” feature of aging
- Leading cause of disability among older adults
- Decline in capacity, legal implications
- By 2060, 1 million cases annually
- Higher lifetime risk in women and Black adults

Fig. 1: Lifetime risk of dementia (from age 55 years to 95 years), the ARIC study, overall and by sex, race and *APOE* ϵ 4 status ($n = 15,043$).



Fang, M., Hu, J., Weiss, J. *et al.* Lifetime risk and projected burden of dementia. *Nat Med*(2025). <https://doi-org.ucsf.idm.oclc.org/10.1038/s41591-024-03340-9>

Dementia Facts

Older Black and Hispanic Americans more likely to:

- acquire Alzheimer's and other dementias
- not receive diagnoses
- report specific kinds of legal issues in accessing care for self or loved one

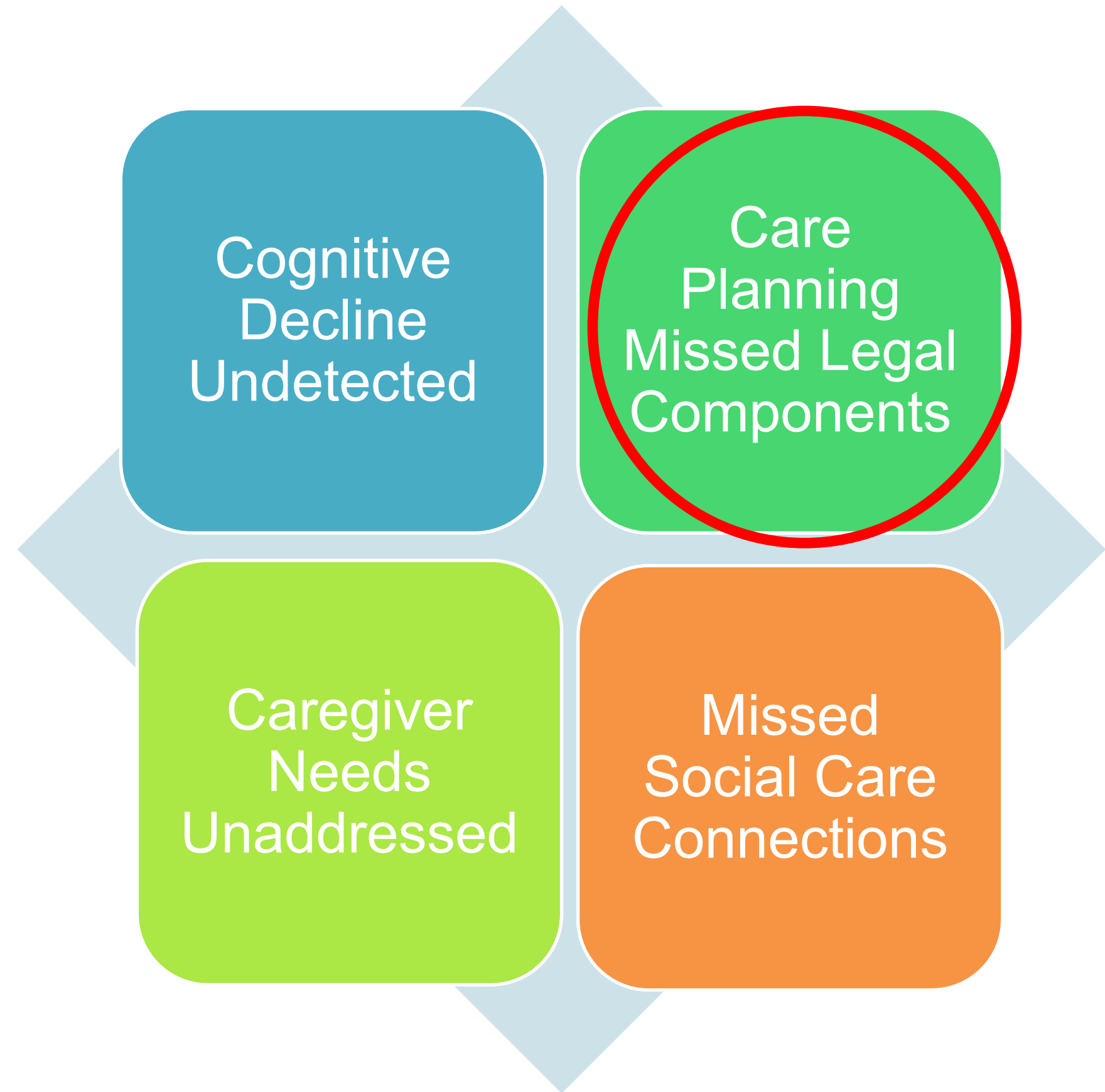


Prevalence of Unrecognized Cognitive Impairment in FQHCs

- 204 adults 65+ without diagnosis
- 5 FQHCs in Indianapolis, Indiana (2023-2024)
- 62.3% mild cognitive impairment, 12.3% dementia
- Black patients 2x more likely to have mild cognitive impairment or dementia than White patients



What Were the Unmet Medical, Legal and Other Related Needs?



Missing from Usual Care Planning: Durable Powers of Attorney, Rep Payees, Other Legal and Financial Aspects



HIPAA PERMITS DISCLOSURE OF POLST TO OTHER HEALTH CARE PROVIDERS AS NECESSARY

Physician Orders for Life-Sustaining Treatment (POLST)

First follow these orders, then contact **Physician/NP/PA**. A copy of the signed POLST form is a legally valid physician order. Any section not completed implies full treatment for that section. POLST complements an Advance Directive and is not intended to replace that document.

EMSA #111 B (Effective 1/1/2016)*

Patient Last Name: _____ Date Form Prepared: _____

Patient First Name: _____ Patient Date of Birth: _____

Patient Middle Name: _____ Medical Record #: (optional) _____

A CARDIOPULMONARY RESUSCITATION (CPR): *If patient has no pulse and is not breathing.*
If patient is NOT in cardiopulmonary arrest, follow orders in Sections B and C.

☐ **Attempt Resuscitation/CPR** (Selecting CPR in Section A requires selecting Full Treatment in Section B)

☐ **Do Not Attempt Resuscitation/DNR** (Allow Natural Death)

B MEDICAL INTERVENTIONS: *If patient is found with a pulse and/or is breathing.*

☐ **Full Treatment** – primary goal of prolonging life by all medically effective means.
In addition to treatment described in Selective Treatment and Comfort-Focused Treatment, use intubation, advanced airway interventions, mechanical ventilation, and cardioversion as indicated.

☐ **Trial Period of Full Treatment.**

☐ **Selective Treatment** – goal of treating medical conditions while avoiding burdensome measures.
In addition to treatment described in Comfort-Focused Treatment, use medical treatment, IV antibiotics, and IV fluids as indicated. Do not intubate. May use non-invasive positive airway pressure. Generally avoid intensive care.

☐ **Request transfer to hospital only if comfort needs cannot be met in current location.**

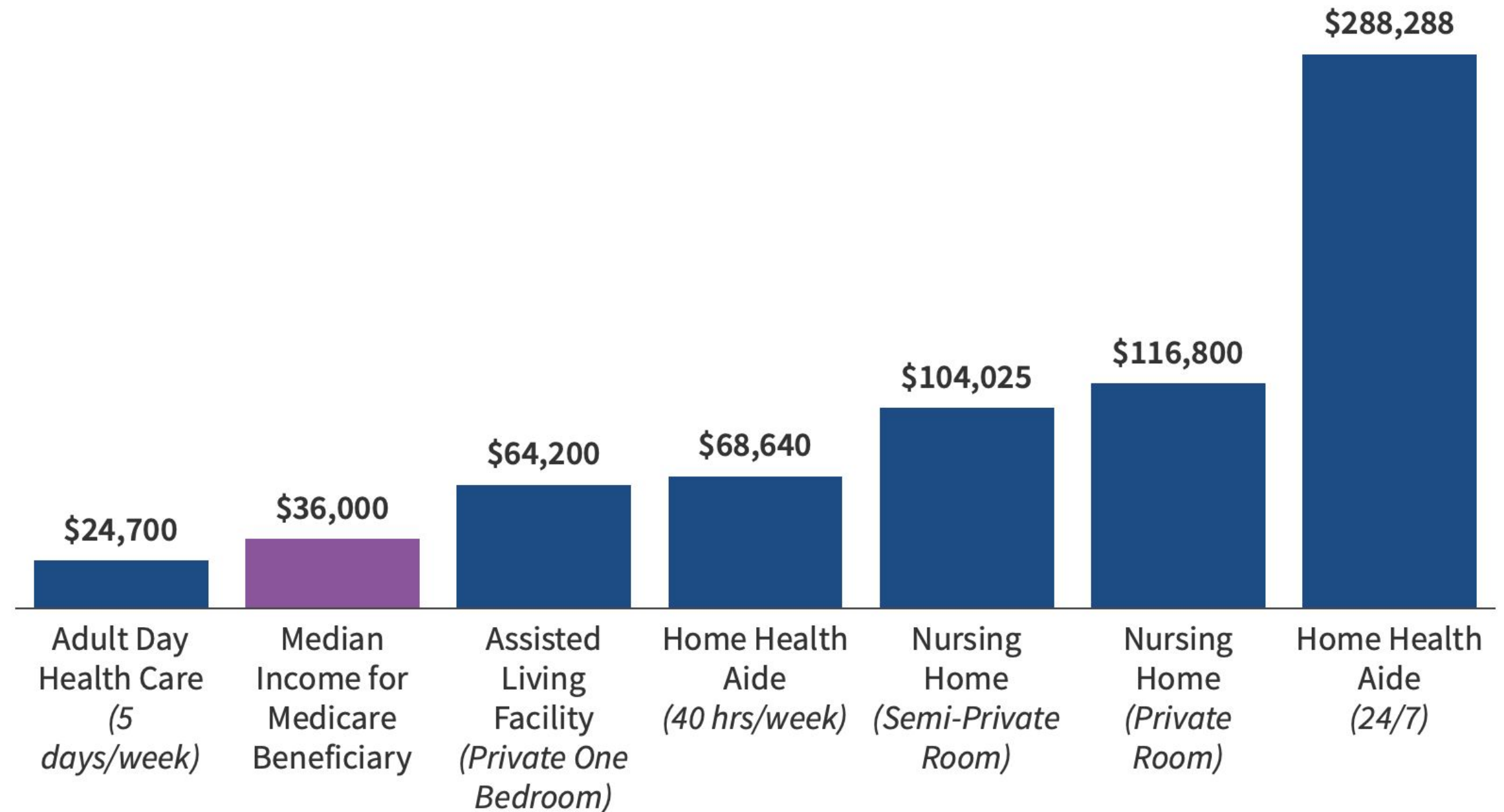
☐ **Comfort-Focused Treatment** – primary goal of maximizing comfort.
Relieve pain and suffering with medication by any route as needed; use oxygen, suctioning, and manual treatment of airway obstruction. Do not use treatments listed in Full and Selective Treatment unless consistent with comfort goal. **Request transfer to hospital only if comfort needs cannot be met in current location.**

Additional Orders: _____

Long-Term Services and Supports Are Extremely Expensive and Not Generally Covered by Medicare

Annual costs of common long-term services and supports (LTSS) in the US compared with the median income for a Medicare beneficiary, 2023

- Half of adults 65+ will need help with activities of daily living (ADLs)
- 1 in 7 will need help for 5+ years



Predictable Legal Needs to Plan for Incapacity/Disability



- Supported Decisionmaking Agreements
- Durable Power of Attorney for Health Care
- Durable Power of Attorney for Finances
- Social Security Representative Payee
- If veteran: VA Fiduciary
- Housing/LTC assessment, planning, and advocacy

Most this requires Mrs. Chase to have mental capacity to create these legal plans.

Older Adults With Greatest Need for Legal Help Don't Get It

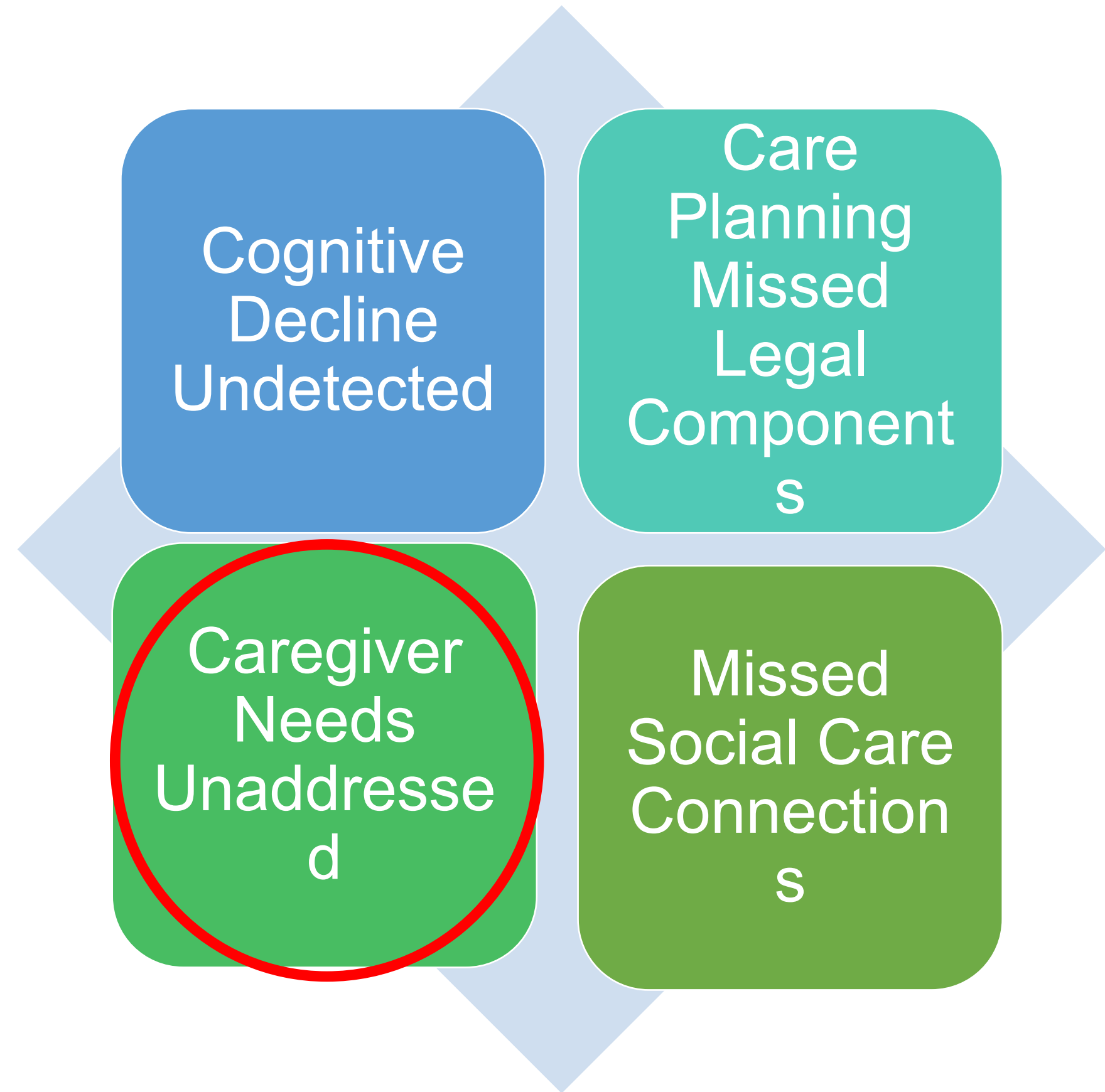
70%

of low income seniors had a civil legal need in 2021 and 31% of those had 5+ civil legal needs

91%

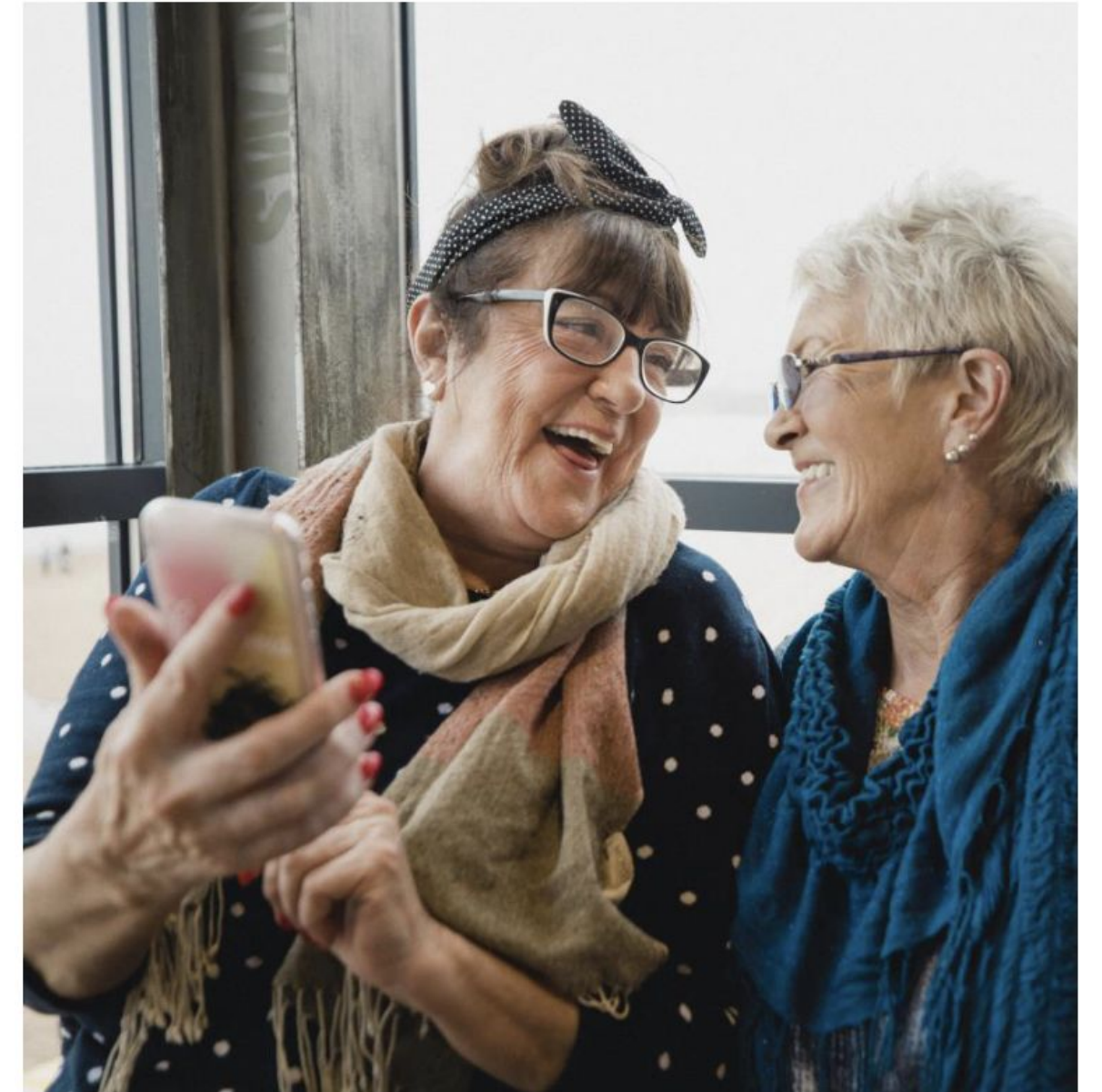
received inadequate or no legal help

What Were the Unmet Medical, Legal and Other Related Needs?



Caregiver Needs: What About Miriam?

- 1 in 5 Americans provide unpaid family care
- 61% report working while caregiving
- 28% are "sandwich" caregivers
- Black and American Indian/Alaska Native children more likely to live in grandfamilies
- Most of us never receive training for the role, including legal responsibilities



Mrs. Chase's Needs Overlap With Miriam's

- Legal recognition of role
- Legal responsibilities as decisionmaker
- What to expect/how to manage Mrs. Chase's money and public benefits
- Workplace protections for caregivers
- Medicaid In-Home Supportive Services may pay her to provide care
- Addressing her own legal and other health-related needs can help reduce stress/burden



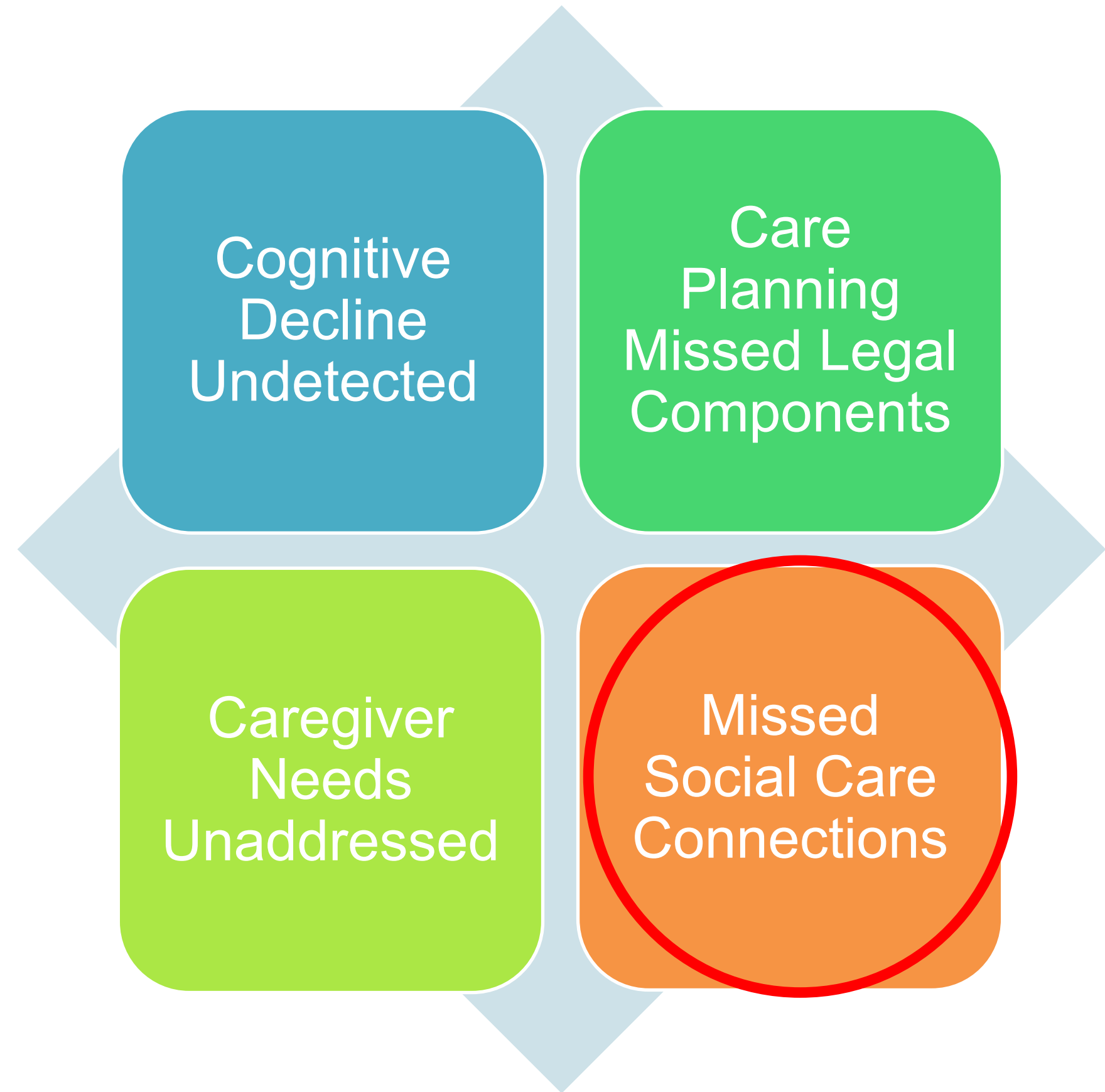
Elder Abuse & Neglect

- 1 in 10 people 60+ (1 in 5 during COVID)
- Nearly half of people with dementia
- Family members perpetrators in 47% of cases
- Medical caregivers (non-family) in 13% of cases
- Only 6.7% did not know their abuser

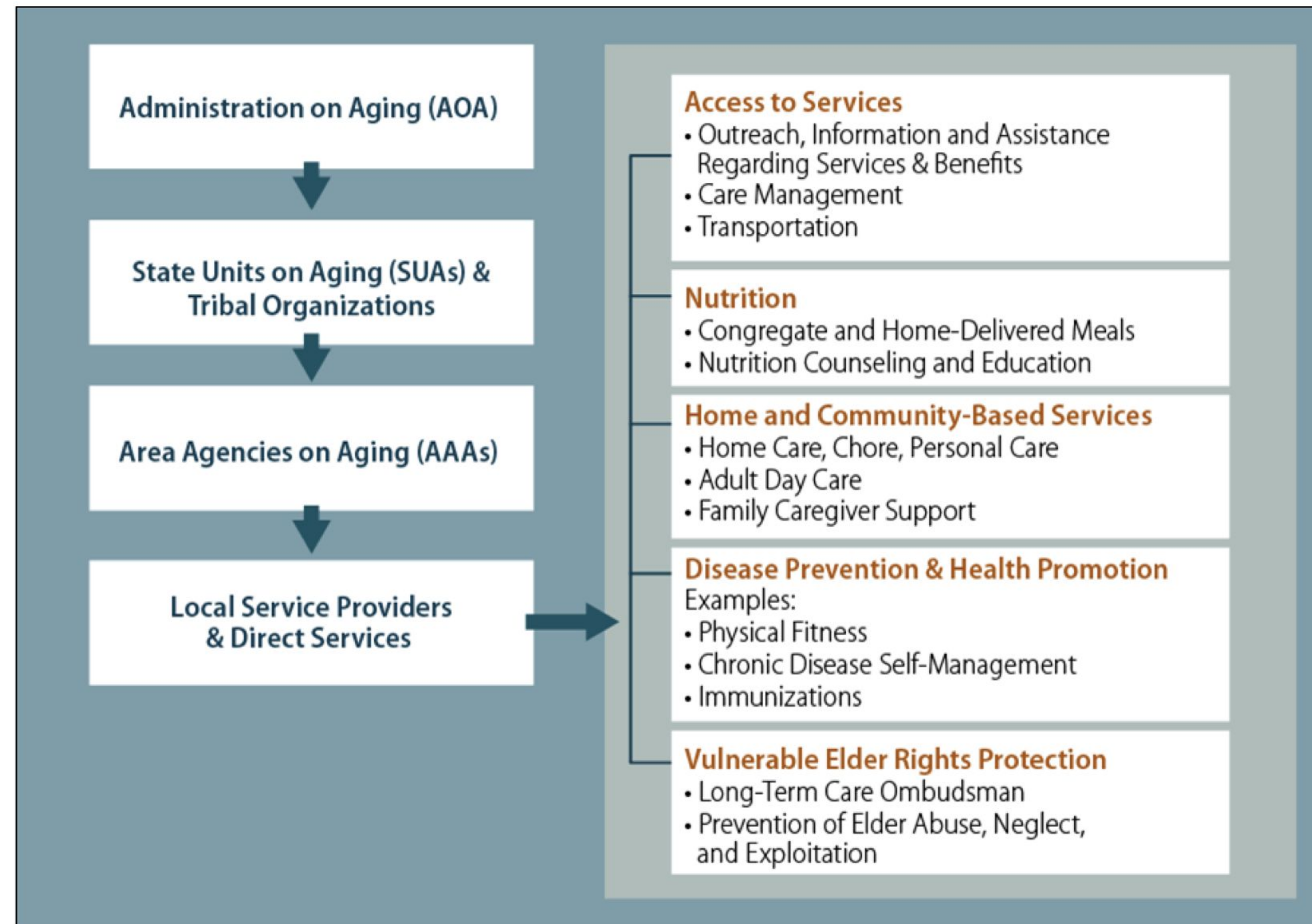


National Council on Aging. Aging in America: Get the facts on elder abuse [Internet]. Available from <https://www.ncoa.org/article/get-the-facts-on-elder-abuse/> (last accessed March 17, 2025)

What Were the Unmet Medical, Legal and Other Related Needs?



The Older Americans Act and The Aging Network

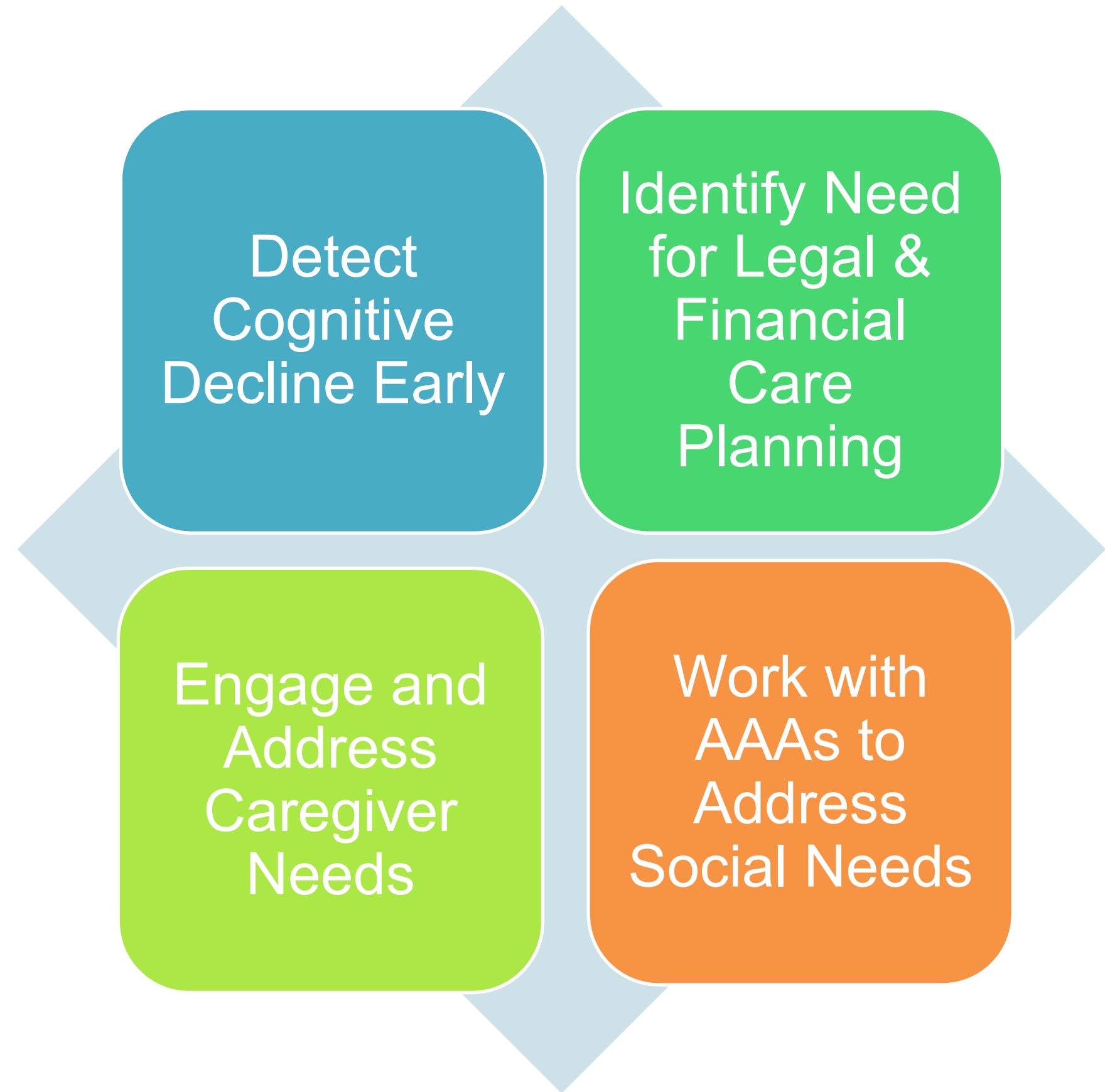




AAAs & Legal Services

- AAAs must provide under Older Americans Act (Title IIIB)
- Without means testing
- Age 60+
- Free and sliding scale
- Restricted from certain services (bringing conservatorship)

Summary: Addressing the Unmet Medical, Legal and Other Related Needs



The Costs of Inaction

Avoidable Conservatorship and Transitions of Care

- Conservatorship a significant contributor to extended length of hospital stay nationally (Moye 2023)
- LOS risks poor health outcomes for patients (Ricotta 2018)
- Massachusetts statewide all-hospital study: **\$18-25 million in bed stays annually** (Bierly-Bowers 2022)
- Estimated preventable cost per hospital per year= **\$800k-\$1.2 mil annually** (Richman 2024, Hooper 2019)



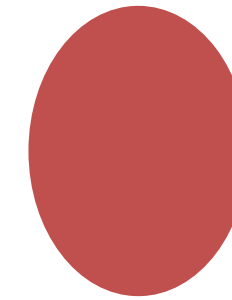
Who is Conserved?

VHA chart review study in MA (Moye 2023)

- Mean age: 71 y/o
- Conservatorship sought for: dementia 56%, schizophrenia 16%, SUD 8%, brain injury 5%, delirium 5%
- 57% had family guardian vs 43% professional
- No SES data available

Non-VA settings: disproportionately older, low-income, disabled, women of color

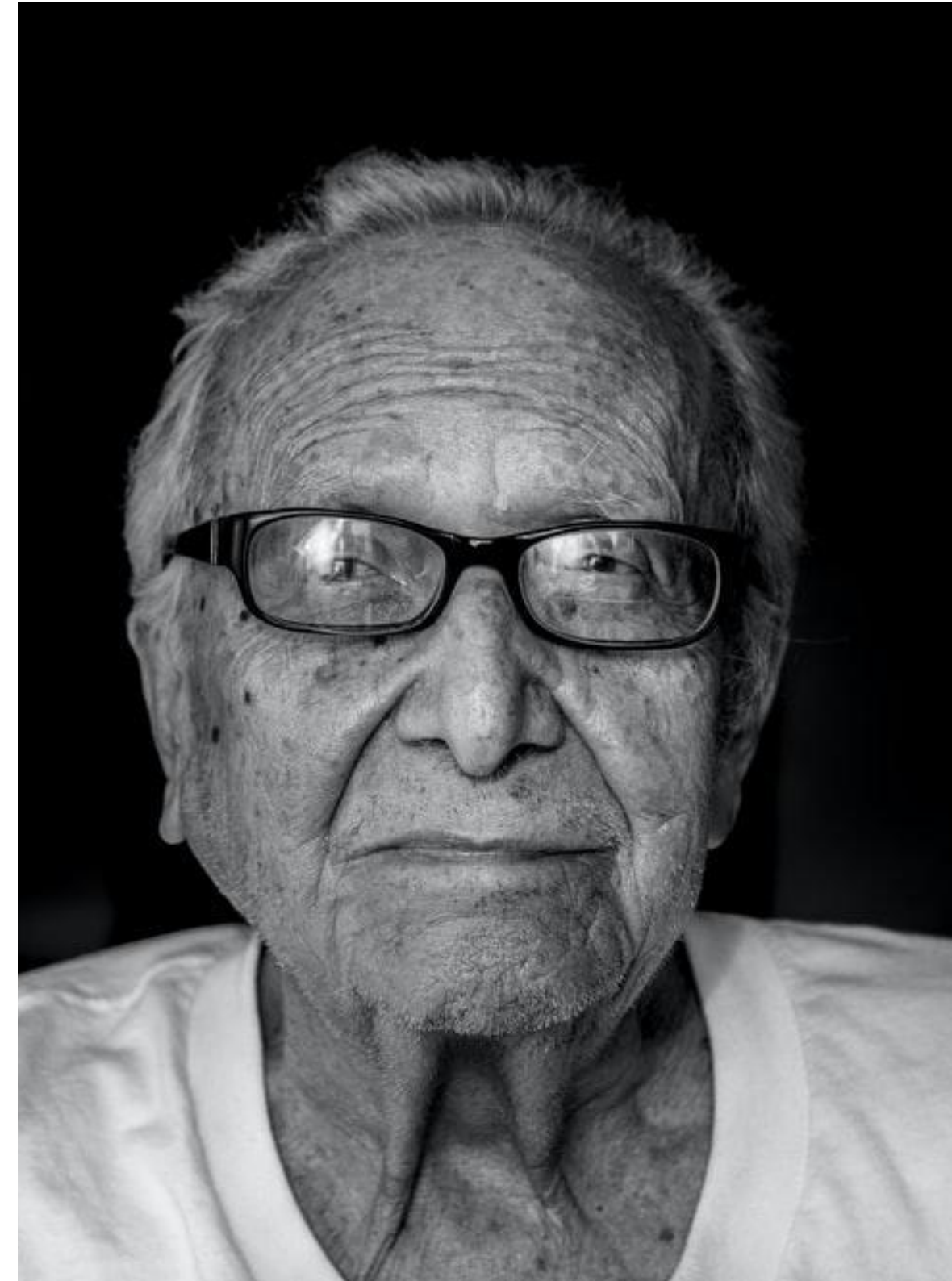
- in FL PG program (Schmidt 2017)
- In NYC (Rosenberg et al 2009)



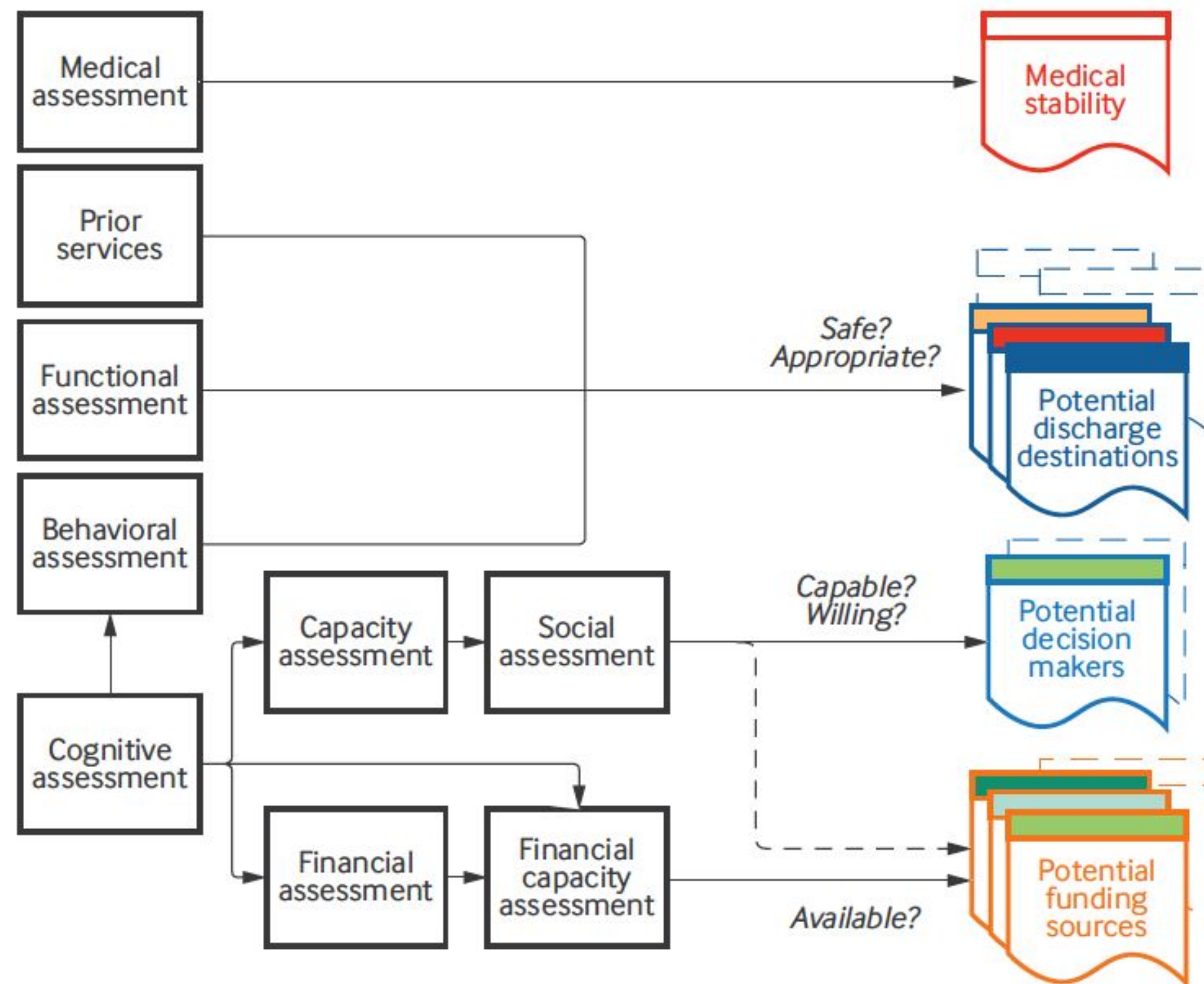
Impacts of Conservatorship on Patients and Families

- No guarantee of resources; loss of resources
- Health outcomes largely unknown
- Loss of civil rights
- Experiences as extension of carceral state on specific populations

(Schmidt et al 2017, Rosenberg et al 2009, Chodos Hooper 2022)

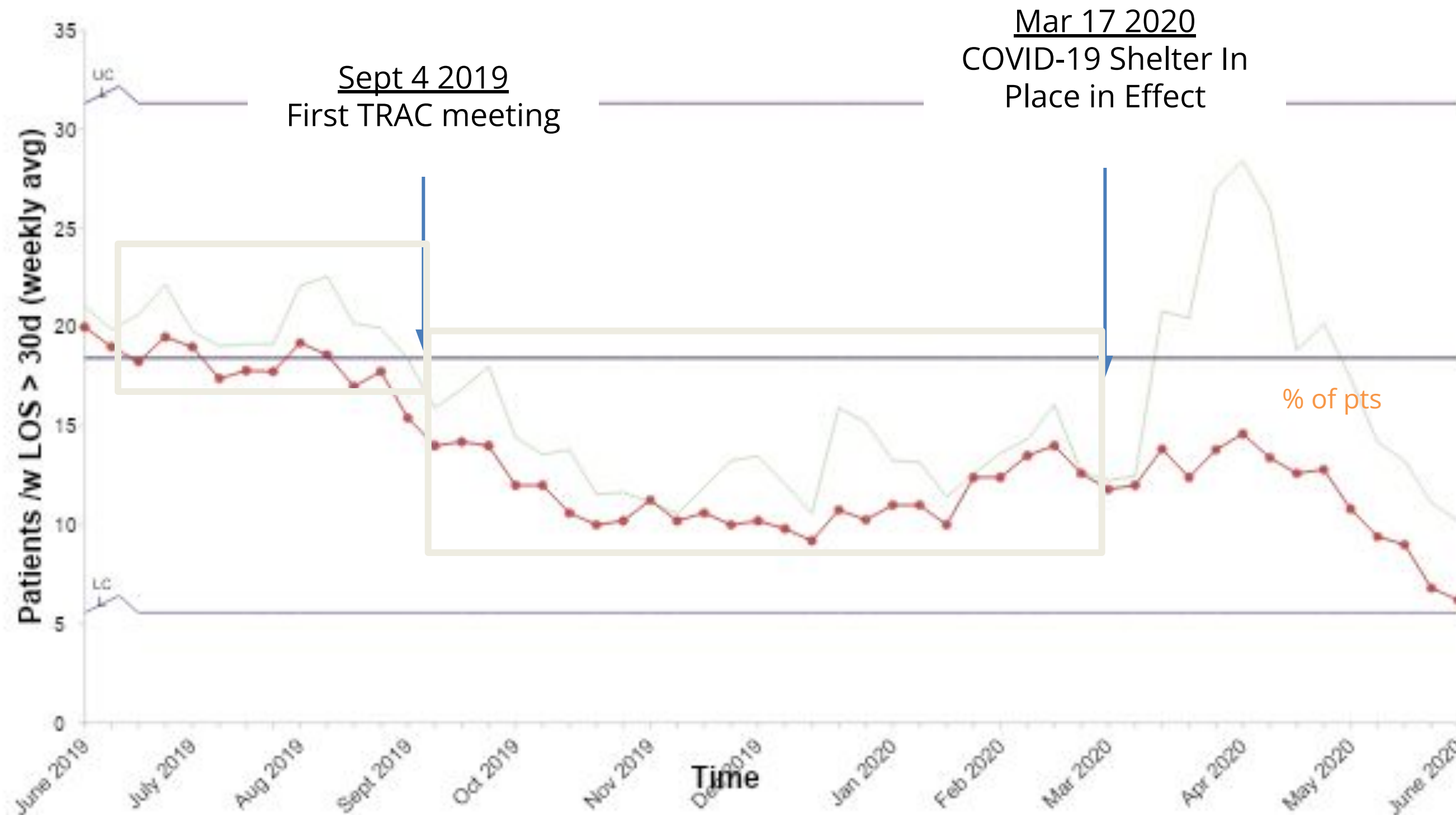


SF VA TRAC Team Framework for Complex Discharge



Lam K, Price E, Garg M, Baskin N, Dunchak M, Hooper SM, Fabiny A, Eng J, How an Interdisciplinary Care Team Reduces Prolonged Admissions Among Older Adults with Complex Needs. NEJM Catalyst Innovations in Care Delivery 2021; 09, DOI:<https://doi.org/10.1056/CAT.21.0204>

Rights-Focused Approach Was Consistent with Cost Containment Goals



Lam K, Price E, Garg M, Baskin N, Dunchak M, Hooper SM, Fabiny A, Eng J, How an Interdisciplinary Care Team Reduces Prolonged Admissions Among Older Adults with Complex Needs. NEJM Catalyst Innovations in Care Delivery 2021; 09, DOI: <https://doi.org/10.1056/CAT.21.0204>

How to Do It With Your MLP: Free Training and Resources

Resources in Early Detection and Follow-on Care in Dementia



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Early Detection. Better Care.

Dementia Care Aware - tools for clinicians and care teams to detect dementia early and provide better care for patients and families.

[Sign Up to Access Our Online Trainings](#)

[Access Our CHA Implementation Guide](#)



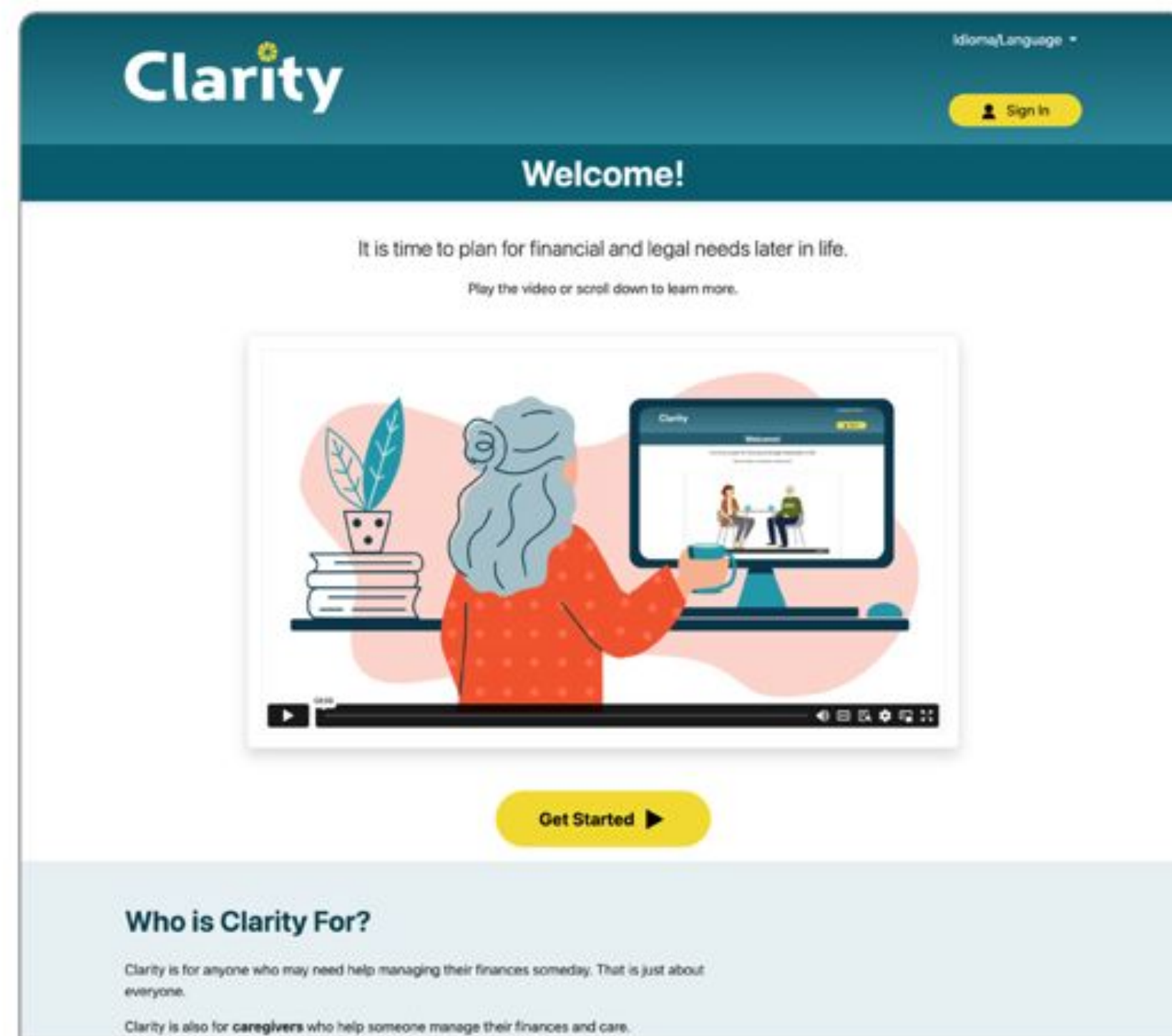
www.dementiacareaware.org

PlanforClarity.Org is a free tool for patients and caregivers to learn about legal and financial aspects of care planning.

NEW! Free tools, live training, & consults for health care teams!

Starting July 2025

Contact: peterselizabeth@uclawsf.edu



This project supported by AARP Foundation.



Caregivers As
Partners in Care Teams

UCSF

University of California
San Francisco



Caregivers As Partners in Care Team (CAP-CT)

A training program that provides health care teams with the skills and confidence to include family caregivers in a patient's care journey.



<https://carepartners.ucsf.edu/>

Visit the website for live training tailored to your clinic, online training, & more!

We Can Do This

All of us deserve to age with health, dignity, and inclusion in our communities.



CONTACT

Sarah Hooper, JD

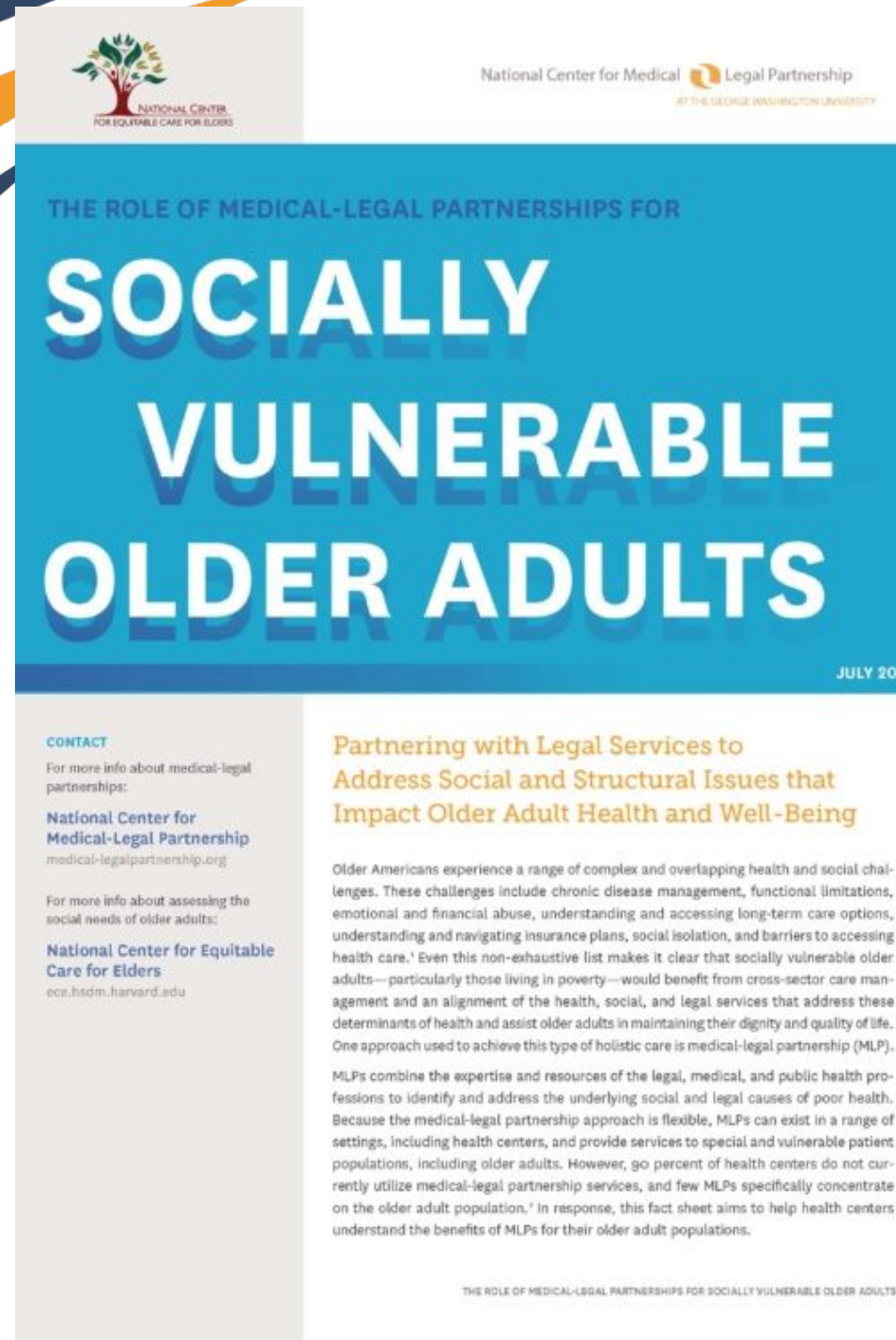
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Questions?

Please use the chat or Q&A function to post questions!

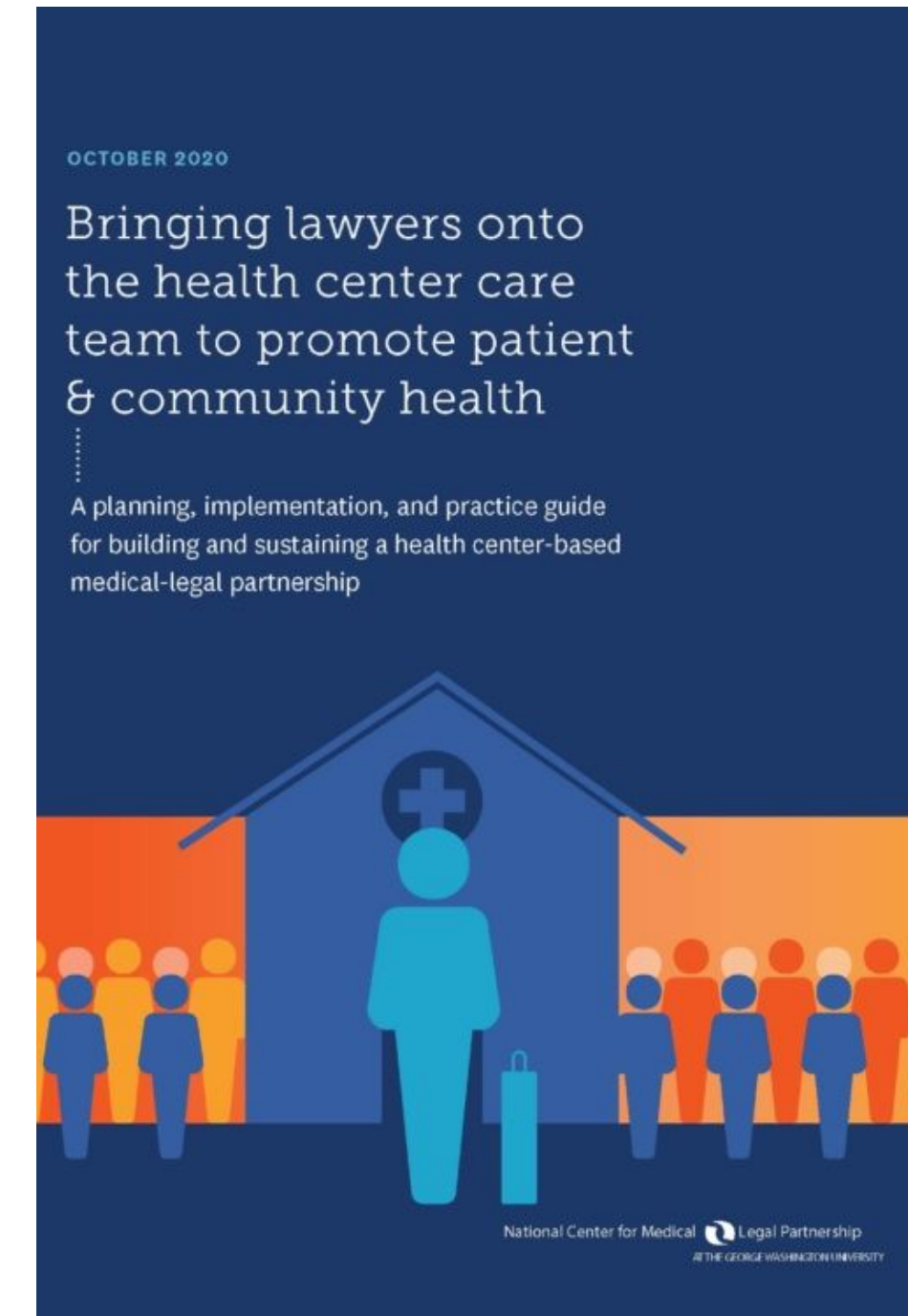
Resources



Fact Sheet: The role of medical-legal partnerships for socially vulnerable older adults
<https://medical-legalpartnership.org/mlp-resources/older-adults-fact-sheet/>



Brief: Socially vulnerable older adults & medical-legal partnership
<https://medical-legalpartnership.org/mlp-resources/older-adults/>



Health Center MLP Toolkit
<https://medical-legalpartnership.org/mlp-resources/health-center-toolkit/>

Related Opportunities

Justice in Aging:

- Resource Library at <https://justiceinaging.org/resource-library/>
- Training / Webinar Events: Receive invitations by signing up for their newsletter at <https://justiceinaging.org/sign-up/>

Our Speakers



Katy McKee

Supervising Attorney
Pennsylvania Health Law Project



Jessica Lippert

Paralegal
Pennsylvania Health Law Project

Register here:

<https://medical-legalpartnership.org/learning-opportunities/>

PART 2: April 24 at 2 PM ET

**UNDERSTANDING AND
ADDRESSING THE
HEALTH-RELATED LEGAL
NEEDS OF OLDER ADULTS
AND THEIR FAMILIES**



Upcoming Learning Opportunities

- **MLP Fundamentals Group Coaching Sessions: Information-Sharing and Privacy Essentials**
 - Session 2 - March 28 at 2PM ET
 - Session 3 - April 4 at 2PM ET
 - Session 4 - April 11 at 2PM ET
- **Getting the Funding You Need: Building Effective Relationships & Pitches**

Sessions will be held weekly on Wednesdays from April 2, 2025 through April 23, 2025 (11 a.m. – 12:30 p.m. PT / 2 p.m. – 3:30 p.m. ET)
- **Understanding and Addressing the Health-Related Legal Needs of Older Adults and their Families - Part 2**

April 24, 2025, at 2 PM ET
- **Legal Aid of North Carolina's Collaborative Approach to Supporting Communities Devastated by Hurricane Helene**

April 29, 2025 at 2 PM ET



Thank You

Please take a moment to complete
our post-session evaluation survey!



[https://www.surveymonkey.com/r/
PFPT8ZK](https://www.surveymonkey.com/r/PFPT8ZK)

A link to the survey is also in the chat.

CONTACT

- Upcoming Trainings:
<https://medical-legalpartnership.org/learning-opportunities/>
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