



BUILDING A STATEWIDE MEDICAL- LEGAL PARTNERSHIP NETWORK



A FLORIDA CASE STUDY
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COMMUNITY
LEGAL SERVICES
of MID-FLORIDA



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ABOUT US

Community Legal Services of Mid-Florida (CLSMF) is a full service civil legal aid law firm that promotes equal access to justice. CLSMF provides professional legal aid to help low-income people protect their livelihoods, their health, and their families. We make it easier for the most vulnerable and disenfranchised Central Floridians to access legal information, gain legal assistance and representation, and to understand their rights. Our lawyers, paralegals, and advocates provide free legal aid, helping more than 20,000 people in Central Florida each year. We help low-income people resolve urgent, non-criminal legal problems that make a difference in their everyday lives, such as protecting the elderly from unlawful evictions, making sure women and children are protected from violence in their homes, and helping veterans receive financial benefits they have earned and need.

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INTRODUCTION

Much of the growth in the medical-legal partnership (MLP) movement has been driven by passionate advocates—in both the legal and health care sectors—at the local level. MLP programs are often initiated, structured and implemented based on community needs, funding incentives and restrictions, local culture and relationships among partners. Yet, as MLPs proliferate across the United States, MLP advocates are focusing on building state and regional networks to better coordinate efforts geographically, improve communication and collaboration among MLPs and organize efforts around sustainable investment and policy strategies.

As the number of MLPs has grown in Florida, advocates have identified the need for statewide planning and coordination. In 2017, MLP leaders embarked on a deliberate planning process to develop and support a statewide network, and in time, a regional network. This report highlights the history of Florida's network, its planning process and statewide activities, and some of the important lessons that were learned in the process. One of the key lessons from Florida, where legal aid was an early adopter of MLP, is the importance of upfront health care engagement and leadership.

Key stakeholders contributed their perspectives for this report. See Appendix 1. The report is intended to help guide MLP leaders considering development of statewide or regional MLPs networks. While a few states have undertaken such efforts, there is still much to be learned about the best ways to fund, sustain and implement these networks.

HISTORY OF THE FLORIDA STATEWIDE NETWORK

EARLY BEGINNINGS OF FLORIDA'S STATEWIDE NETWORK

Florida was an early adopter of medical-legal partnership. In 1996, the HIV Law Project was established through state funding as a partnership between Coast to Coast Legal Aid of South Florida, Legal Aid Service of Broward County and several health care entities serving people with HIV.

Then in 2001, the Jacksonville Area Legal Aid partnered with Wolfson Children's Hospital and Sulzbacher Village Community Health Center to form the Northeast Florida Medical-Legal Partnership. Between 2001 and 2013, new MLPs were created at Florida International University in Miami, in Palm Beach County, and at a Veteran's Administration clinic in south Florida.

In 2014, Anne Swerlick, Deputy Director of Florida Legal Services, was awarded a Where Health Meets Justice fellowship by National Center for Medical-Legal Partnership (NCMLP). The fellowship was designed to help civil legal services leaders further develop and improve their MLPs. As part of her work for the fellowship, Anne assessed the landscape of existing MLPs across the state and found that they were usually siloed projects, often did not even know about each other, and rarely communicated or shared ideas or best practices. For her final fellowship report, Anne argued that Florida needed a "strategic, coordinated statewide plan" for MLP. Her report supported early collaboration and coordination among the state's MLPs and helped to ignite momentum toward a statewide network. In her report's recommendations,

Anne noted that the Florida Bar "Vision 2016" was undertaking an in-depth review of the delivery of legal services and that it was important for the state's MLPs to be at the table.

Fast forward to 2016. Inspired by the NCMLP summit, Natalie Castellanos, an attorney from the MLP at Florida International University in Miami, and Katy DeBriere, an attorney from Northeast Florida MLP, began discussing how to get a statewide network off the ground. Katy connected with the Florida Justice Technology Center (FJTC), which was funded by the Florida Bar Foundation to enhance the use of technology for access to legal aid. One project of FJTC was building FLAdvocate.org, a resource for legal aid and legal services attorneys, advocates, and staff. Katy and Natalie worked with the FJTC to create an MLP

"No one size fits all Florida MLPs. They are creations of unique local partners and circumstances prompting them to join forces to serve their common clients and patients. However, all MLPs could benefit from a statewide coordinated effort to address common opportunities and challenges. This includes not only the mechanics and logistics of funding and operating MLPs, but also identification of systemic issues which address the root causes of poverty and follow up on impact strategies which go beyond individual case by case resolution."

**Anne Swerlick, Florida Legal Services
(now Policy Attorney and Analyst for the Florida Policy Institute)**

practice area for the website. To better inventory the MLPs in the state, they conducted a survey through legal aid listservs and found that eleven MLPs were active in the state. Florida Legal Services then held a full day meeting for MLPs in the state where the results of the survey were presented. This early work by Anne, Natalie and Katy, with guidance from NCMLP, set the groundwork for a funding proposal to the Florida Bar Foundation to support a statewide MLP planning project.

THE STATEWIDE PLANNING PROJECT

In April 2017, the Florida Bar Foundation awarded funding to Community Legal Services of Mid-Florida (CLSMF) to staff the statewide planning project, with a “leadership cohort” of the executive directors from Florida Legal Services, Legal Services of North Florida, and Community Legal Services of Mid-Florida. Also in 2017, the Foundation for a Healthy St. Petersburg, a health conversion foundation whose mission is focused on health and racial equity, was developing a request for proposals from local legal aid programs to initiate MLPs at federal qualified community health centers. The foundation engaged NCMLP to provide technical assistance for this process. CLSMF also contracted with NCMLP and an MLP consultant, Mallory Curran, to help design and implement the statewide planning project. Together the stakeholders developed a learning collaborative to bring together a group of established, new and developing MLPs at legal aid organizations funded by the Florida Bar Foundation. After an application process, eleven programs were selected to participate. The learning collaborative facilitated communication, learning and data collection among the MLPs.

THE LEARNING COLLABORATIVE

Curriculum

The learning collaborative sponsored nine online learning sessions (monthly calls) on topics ranging from community health need assessments and MLP self-assessment, to planning and implementation and data collection and evaluation. In addition to these sessions, participants were given homework to further their learning. Because the collaborative was driven primarily by legal aid organizations, many of

“The best part of the learning collaborative was hearing how other MLPs structure their partnerships and work. I always left with ideas about ways to improve our work together.”

Rachel Coleman, MD
Shands University of Florida Pediatrics

these activities focused on health care engagement. Participants created a list of health care entities in their service area, reviewed community health needs assessments, interviewed local health or public health leaders and toured a health care facility. Existing MLPs conducted a self-assessment designed by NCMLP and developing MLPs were tasked with building a relationship with a health care partner.

Technical Assistance

To facilitate communication and sharing among MLPs, participants committed to one-on-one phone calls with another MLP program to share experiences, challenges and best practices. CLSMF staff also provided one-on-one technical assistance to participating MLP programs geared toward trouble-shooting problems and concerns, helping to identify the best health care partner and developing funding strategies.

Data Collection

To help MLPs identify potential health care partners, legal aid participants added two questions to their legal case management system (LegalServer) to ask prospective clients at intake:

1. Are you willing to answer a health care question?
2. In the past year, where have you and your family received health care?

While many clients either declined to answer the question or gave answers that did not provide sufficient data for tracking where they received their health care, the process of developing uniform data collection across legal aid programs statewide helped to set the stage for statewide MLP data collection in the future.

Statewide MLP Summit

To further communication and collaboration, the planning project held a statewide MLP summit in Tampa in 2018, with roughly forty people in attendance. The summit focused primarily on health care engagement and strategies for investment in MLP. MLP leaders, local lawyers, healthcare champions and funders spoke on panels and participants were given the opportunity to share challenges and successes from their MLPs.

HEALTH CARE ENGAGEMENT

As the early history demonstrates, MLP development in Florida stemmed almost entirely from passionate legal aid lawyers and leaders. Consequently, only a small number of health care partners took a leadership role in the statewide planning process. Therefore, planners identified healthcare leadership and funder engagement as fundamental to future development of a strong MLP network with shared goals. They attended targeted conferences of relevant health care associations, such as the Florida Association of Free and Charitable Clinics and the Florida Association of Community Health Centers, to educate potential health care partners about MLP.



Caption: Samantha Cools (CLSMF MLP attorney) and Christina Russo Walters (Manager of Public Interest & Medical-Legal Partnerships) at the Florida Association of Free and Charitable Clinics annual conference in 2019.

GUIDING PRINCIPLES

One of the core components of building the statewide network was the development of guiding principles for Florida MLPs. The planners saw guiding principles as important to:

- Building a framework for fully integrated and sustainable MLPs;
- Directing the formation of new MLPs or improving existing partnerships;
- Demonstrating unity across Florida MLPs;
- Setting the stage for statewide sustainable investment in MLPs; and
- Supporting the potential for an official standard or designation for MLPs.

A core group from the learning collaborative identified the themes for the guiding principles, which were then distilled into a document. The first draft was presented at the 2018 summit. Following the summit, a working group consisting of health care leaders and funders revised the draft principles. After seeking feedback from frontline MLP staff, the guidelines were revised and finalized. They were adopted by the Florida Legal Aid Association in October 2018. The guiding principles have served multiple purposes across MLP sectors.

FOR FUNDERS

The principles help to introduce the concept of MLP and how it fits within other efforts to address social determinants of health (SDOH) and health inequity. The principles bring credibility (the best thinking on the MLP approach) and offer a “checklist” that funders may use to evaluate the strength of a fund-

“From a philanthropic lens, the guiding principles are very useful. They help funders to gauge the credibility of the model being presented in a funding application. They offer the best thinking on how the model should work and milestones to work toward over time. There will be challenges for any program, but they serve as a kind of GPS to guide the work.”¹

Julie Rocco
Foundation for a Healthy St. Petersburg

ing application submitted by an MLP. They may also serve as “milestones” for a new MLP by, for example, indicating the MLP’s success in achieving integration within its partnering health care institution(s).

FOR LEGAL AID ORGANIZATIONS

The principles serve as a tool for initial structuring of an MLP, an agreed upon set of best practices, and a starting point for drafting a memorandum of understanding between legal and health care partners.

FOR HEALTH CARE ENTITIES

The principles articulate the range of roles an MLP can serve in clinic activities related to SDOH and expectations related to engagement by the partners.

Guiding Principles for Florida MLPs

01

Focus on low-income or other vulnerable patient populations.

02

Strive to move toward a fully integrated medical-legal partnership model.

03

Perform the following activities:

- Provide access to legal advice and representation for patient-clients;
- Engage in bi-lateral, interprofessional training of health care and legal teams;
- Provide consultations between health care and legal teams;
- Develop screening methods and protocols for responding to “positive” screens for health-related legal needs;
- Support improvements within health care systems; and
- Foster interprofessional advocacy on the local, state, and national levels, where permitted.

04

Maximize opportunities to document their impact.

05

Benefit from investment by all local partners.

06

Create a Memorandum of Understanding that outlines goals, expectations and responsibilities of all partners.

07

Support one another, share ideas and tools, and pool resources when applicable and appropriate.

08

Work together statewide to engage with potential public health and philanthropic investors at the state and national level.

09

Engage with the private sector, in particular with lawyers in practice, to further expand capacity.

10

Provide opportunities for the next generation of health care, public health, and legal professionals to learn in interprofessional settings through partnerships with law schools, medical schools, nursing schools, public health schools, social work schools, and other health professional schools.

11

Accept referrals from fellow Florida MLPs for patients who are:

- Eligible for services from both the referring and accepting MLP;
- Present legal cases that are within the priorities of the referring MLP, and
- Reside within the service area generally covered by the accepting MLP’s legal program.

EXPANDING TO A REGIONAL NETWORK

OVERVIEW

Working with MLP partners in nearby states, the planners decided to expand the statewide network to incorporate MLPs from the larger Southeast region. Georgia, Alabama, Tennessee and South Carolina each had active MLPs, but substantially fewer than Florida. Joining forces with the Florida network, these other southeastern states benefit from the network's structured communication and collaboration with other MLPs and opportunities to leverage resources and expertise. To support continued communication and collaboration, CLSMF continues to offer monthly calls as a forum for regional MLPs to discuss successes and challenges and to learn from one another about topics such as: Interprofessional Education Memorandum of Understanding Referrals Upstream MLP activities Return on investment.

2019 SURVEY

In April 2019, with the help of the Florida Justice Technology Center, CLSMF conducted a survey of MLPs in the region to map activities, identify areas for collaboration and support sustainability. The survey was sent via email to the MLP listserv (which is hosted by the Florida Advocate website and includes members from GA, AL, SC and TN), legal services executive directors in Florida and law school clinical directors in Florida.

The survey collected information from each MLP including:

- Legal partners
- Health care partners
- Patient populations served
- Health care specialties
- Areas of law addressed (I-HELP categories)
- Details on MLP activities
- Funding sources

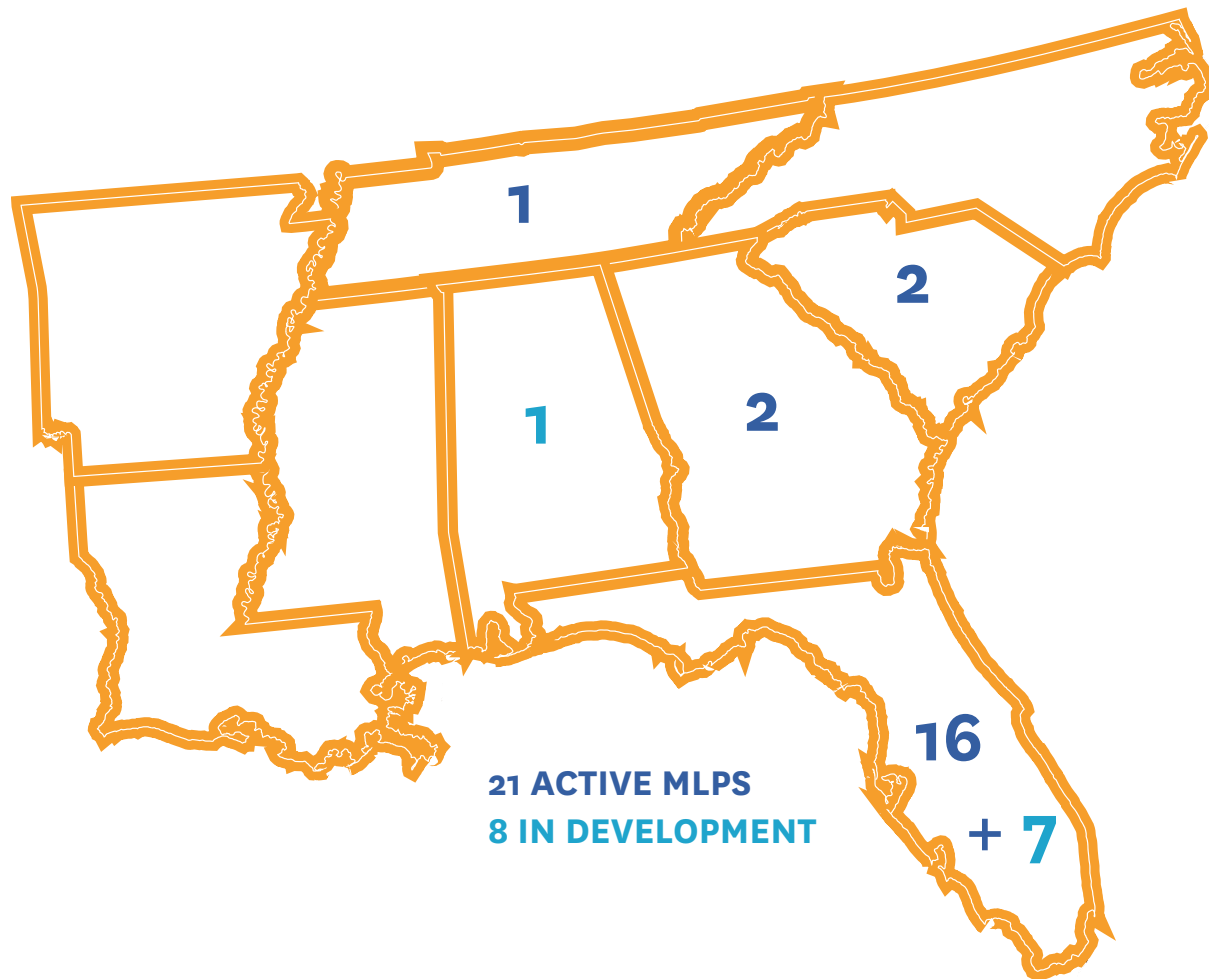
The survey revealed that MLPs currently serve 31 of 67 counties in Florida, predominantly in the northeast

and southeast regions of the state. However, seven MLPs are currently in development; these new programs will cover an additional five counties. Regionally (including FL, GA, AL, TN and SC) the survey found that there are 23 legal institutions and 28 health care institutions partnering in MLPs. Health care partners include community health centers, Veterans Administration hospitals and clinics, children's hospitals, behavioral health providers, early childhood and dental providers. Academic medical centers, medical schools and a School of Public Health are also engaged in MLPs. Legal partners include legal aid organizations and law schools, oftentimes partnering with one another in addition to partnering with health care organizations. Patient populations vary dramatically and include pregnant women, children, veterans, people with HIV, adults with mental illness, veterans, immigrants, homeless individuals, and seniors.

The most common funding sources were from hospitals or health systems, followed by charitable giving, including specific grants made by the Florida Bar Foundation.

Southeast Medical-Legal Partnerships Reported in 2019 Regional Survey

Note: The survey was sent to legal aid organizations and counted the number of these organizations reporting MLP participation. This number does not correspond to the total number of MLPs in Florida reported by the National Center for Medical-Legal Partnership (NCMLP) because NCMLP counts the number of health care entities participating in an MLP, rather than the number of legal aid organizations reporting MLP activity. Since some legal aid organizations partner with multiple health care entities, the number of Florida MLPs reported by NCMLP is larger.



2019 SUMMIT

As in 2018, network leaders again brought together MLPs from across Florida for a summit, but this time regional MLP partners were included as well. The 2019 summit in Orlando focused on two important MLP activities: data collection and evaluation and upstream advocacy. Summit workshop topics included:

- What are we trying to show and why?
- What data should we collect and where / how should we collect it?
- Upstream Activities: (1) Overview of 45 CFR 1612 Restrictions on Lobbying and Certain Other Ac-

tivities for Legal Services Programs receiving federal funding from the Legal Services Corporation (2) Examples of upstream activities undertaken by unrestricted MLPs such as advocacy related to Medicaid, immigrants' access to public benefits and housing safety; and (3) What we've learned: upstream activities supporting Census 2020.

The summit provided dedicated time for MLPs to share best practices, think strategically about challenges and support one another through collaborative problem-solving.

STAKEHOLDER PERSPECTIVES ON THE VALUE OF STATEWIDE & REGIONAL NETWORKS

COMMUNICATION AND COLLABORATION

Stakeholders note that prior to the network, MLPs across Florida and the region were siloed and insular, often unaware of each other's activities. This meant that new MLPs or even existing ones continued to "reinvent the wheel" in designing or advancing their programs. For example, MLPs focused on veterans did not have the opportunity to compare models and strategies for contracts with the VA; there was little collaboration or communication among MLPs about the pros and cons of particular screening tools or data collection strategies. Practitioners often felt isolated in their daily work. The network has provided a critical forum for sharing of information. Technology (e.g. the website, webinars, conference calls) has been important to supporting regular communication, collaboration and sharing of resources. State and regional summits have built and nourished relationships across distance. Hearing the perspectives of attorneys, clinicians, health care administrators, funders and business leaders from across the state and region has brought new energy and insight to daily work.

FUNDING STRATEGY

A statewide or regional network helps individual MLPs to think together strategically about funding and long term investment. Legal services programs are chronically underfunded and often compete for the same limited funds. The statewide effort has helped funders and legal services programs to develop larger partnerships, joining two or more legal services programs with a range of health care partners to serve a geographic area more effectively and efficiently. Funders prefer a coordinated approach to investment that is more likely to demonstrate impact. A more unified approach to data collection is also important to funders who are more likely to fund evidence-based interventions.

SHARED GUIDING PRINCIPLES

Having common language and shared principles help MLP stakeholders to better articulate the purpose, value, structure and implementation of MLPs to funders and health care partners. Having these principles enables MLPs to be viewed not as local, individual grant funded projects, but rather part of a strategic and replicable approach to SDOH and health inequity in the state. This supports more systemic approaches to planning such as engaging managed care organizations or hospital associations to support MLP.

UPSTREAM ADVOCACY ACTIVITIES

Prior to the statewide network, few MLPs were working together strategically to identify systemic policy advocacy opportunities in which pooling of resources could be beneficial. Coordinating efforts helps to streamline messaging, demonstrate support (of legal and health care sectors) and amplify impact. Stakeholders are more likely to be invested in systemic policy advocacy when there is a coordinated approach across the state and resources can be leveraged and pooled across programs.

FLORIDA MLP TIMELINE

1996

The HIV Law Project established in Broward County

2001

Northeast Florida Medical- Legal Partnership launched in Jacksonville

2001 - 2003

Number of MLPs in Florida expands to five

2014

Anne Swerlick of Florida Legal Services promotes need for statewide MLP network

2016

Statewide survey conducted by the Florida Justice Technology Center, with input from Natalie Castellanos and Katy Debriere, identifies 11 MLPs in Florida; First Florida MLP summit is held in Miami

2017

Florida Bar Foundation awards funding for statewide planning project; NCMLP provides technical assistance to project, supporting a learning collaborative

2018

Florida Legal Aid Association adopts Guiding Principles for MLP created by learning collaborative participants; Statewide Summit held in Tampa

2019

Regional MLP survey finds 23 legal institutions and 28 health care institutions engaged in MLPs; Second MLP Summit is held in Orlando; Statewide network leaders present at NCMLP Summit

LESSONS LEARNED

OVERVIEW

Florida stakeholders identify several lessons learned from their experience developing a statewide and then regional MLP network. These serve as recommendations to other states considering building a statewide MLP network.

01

STAFF IT.

FUND DEDICATED STAFF TO IMPLEMENT MLP NETWORK PLANNING ACTIVITIES

Without dedicated staff, the mechanisms for regular communication, collaboration and planning are unlikely to be successful or endure over time. Having a staff person with dedicated time at CLSMF has enabled the network to expand and thrive.

Because MLP development and network planning in Florida were driven by legal aid organizations, health care engagement and leadership were lacking. Strong participation at the outset from health care practitioners and leaders is critical not only to sustainability of MLPs, but also to network planning and long-term success.

Additionally, funding restrictions for the statewide planning process in Florida meant that some types of MLP programs, such as law school clinics, could not initially be included in the learning collaborative. Having all stakeholders at the table as early as possible will ensure that the depth of MLP experience is represented.

02

BRING EVERYONE TO THE TABLE.

INVOLVE AS MANY MLP STAKEHOLDERS AS POSSIBLE IN NETWORK PLANNING, LEARNING AND COMMUNICATION.

03

LEVERAGE TECHNOLOGY

ENGAGE TECHNOLOGY PARTNERS TO EFFECTIVELY FACILITATE STATE OR REGIONAL COMMUNICATION.

The Florida Justice Technology Center was crucial to supporting the statewide network by supporting communication, information sharing, and the 2016 and 2019 MLP surveys.

04

PLAN AHEAD

CONSIDER TIME COMMITMENT AND CONSTRAINTS OF STAKEHOLDERS.

Monthly calls can be difficult for busy practitioners, especially clinicians with inflexible schedules. Plan the dates and times for calls well in advance and consider times that may be most accessible for clinicians.

05

REMEMBER LOCAL CONTEXT

BALANCE STATEWIDE SUPPORT AND COLLABORATION WITH AN UNDERSTANDING OF LOCAL CONTEXT.

MLPs are not “one-size-fits-all” and depend heavily on local context and relationships. State or regional networks should help to facilitate health care and legal partner engagement, but local stakeholders must take ownership of relationship building.

06

BE FLEXIBLE

TAILOR LEARNING AND ENGAGEMENT ACTIVITIES TO THE AGE AND EXPERIENCE OF THE MLP PROGRAM.

MLP programs vary dramatically from start-up to long-term. Effectively utilizing experience from older MLPs to inform start-ups, while also offering older MLPs support to continue to grow and improve can be challenging. Planners can gain insight from different stakeholders about how best to structure activities appropriately.

07

LOOK AHEAD

DEVELOP STRATEGIES FOR SUSTAINING THE NETWORK, INCLUDING FUNDING.

To sustain the network over time, there must be long-term funding to support staffing and infrastructure. Strategies for sustainability may include annual membership fees or engaging statewide funders.

A GROWING TREND: THREE EXAMPLES OF STATEWIDE & REGIONAL NETWORKS

OVERVIEW

Like Florida, other states have invested in statewide planning and networking. Below are three examples of other state efforts.

NEW YORK COALITION OF MEDICAL-LEGAL PARTNERSHIPS

Initially funded by the New York State Health Foundation and led by the New York Legal Assistance Group (NYLAG), the New York Coalition of Medical-Legal Partnerships was formed in 2008. The coalition consists of a network of medical and legal professionals from across the state and is designed to increase communication across MLPs and streamline technical assistance to developing MLPs. The coalition spearheaded passage of Section 22 of the New York State Public Health Law authorizing the New York Department of Health to designate certified “health-related legal service programs,” under standards established by the Department in 2013. “Health-related legal service program” is defined as “a voluntary collaboration between health care providers and legal assistance organizations including, but not limited to, pro bono programs and law school clinics, to address patients/clients’ basic needs by providing a variety of on-site legal services without charge to assist only income-eligible patients/clients and their families to

resolve legal matters or needs that have an impact on the patients/clients’ health or are created or aggravated by the patients/clients’ health issues.”²

THE MONTANA HEALTH JUSTICE PARTNERSHIP

Another example of state level support for MLP is the Montana Health Justice Partnership formed in 2015. Initially funded by the Montana Healthcare Foundation, the partnership harnessed the support of the Montana Primary Care Association to connect four Community Health Centers in geographic clusters with Montana Legal Services Association (the statewide organization) to provide services to patients. This partnership has enabled a strategic approach to MLP across the state through the Primary Care Association’s support of the MLP model in its community health centers. It has significantly increased access to legal assistance by as much as 184% in some of Montana’s most remote communities.³

THE TEXAS MEDICAL-LEGAL PARTNERSHIP COALITION

Texas is the latest state to coordinate MLP efforts statewide to improve communication and collaboration. In January 2018, an environmental scan of MLPs in the state indicated that Texas had 10 MLPs in Houston, Austin, San Antonio, Waco, Dallas, El Paso and on the Mexican border in Brownsville. With leadership from the Harris County Public Health Department and the Texas Legal Services Center, the Texas MLP Coalition was formed to coordinate communication across MLPs. Given the size of the state, the coalition holds monthly calls for MLP lawyers and quarterly calls for MLP clinicians, offering the opportunity to discuss challenges, share best practices and develop a policy advocacy agenda.

Conclusion

There are more than 450 MLPs in 48 states across the country. As MLP is increasingly recognized and institutionalized as an effective approach to SDOH and systemic advocacy for underserved populations, coordination across programs is critical. Statewide and regional networks can serve to coordinate and empower MLPs while also supporting their unique contributions at the local and community levels.

Endnotes

1. Anne Swerlick. Project Summary: 2014 Where Health Meets Justice Fellowship. November 14, 2014. (On file with the author).
2. New York State Department of Health. Standards for Health-Related Legal Services Programs that Serve Income Eligible Individuals and Families Pursuant to PHL Section 22. Available at https://www.health.ny.gov/diseases/aids/providers/regulations/standards_for_health_related_legal_services_prog.htm
3. Montana Healthcare Foundation. Montana Health Justice Partnership. Available at <https://mthcf.org/grantee/montana-legal-services-association>

APPENDIX 1: INTERVIEWS

NAME	POSITION	ORGANIZATION	LOCATION
Fred Anderson, MD	Associate Professor Medical Director	Florida International University, Herbert Wertheim College of Medicine, Department of Humanities, Health, and Society	Miami
Lisa Brody, JD	Attorney	Bay Area Legal Services	St. Petersburg
Natalie Castellanos, JD	Director, Policy and Public Affairs	Health Foundation of South Florida (formerly of FIU MLP)	Miami
Rachel Coleman, MD	Pediatrician	Shands University of Florida	Gainesville
Katie DeBriere, JD	Legal Director	Florida Health Justice Project (formerly an attorney with the Northeast Florida MLP)	Jacksonville
Julie Rocco, MPA	Senior Program Officer - Research	Foundation for a Healthy St. Petersburg	St. Petersburg
Christina Russo Walters, JD	Manager of Public Interest and Medical-Legal Partnerships	Community Legal Services of Mid-Florida	Orlando
Anne Swerlick, JD	Senior Policy Analyst	Florida Policy Institute (formerly of Florida Legal Services)	Orlando

APPENDIX 2: MLPS REPORTED IN 2019 REGIONAL SURVEY

MLP NAME	YEAR EST.	STATE	LEGAL PARTNER(S)	HEALTH CARE PARTNER(S)	FUNDING	COUNTIES SERVED
Bay Pines VA MLP	2018	FL	Bay Area Legal Services, Stetson Law School	Bay Pines VA	Foundation/Charitable Giving	Pinellas
Carolina Health Advocacy MLP	2017	SC	South Carolina Legal Services, University of South Carolina School of Law	Prisma Health Midland	Foundation/Charitable Giving	Lexington, Kershaw, Fairfield, Saluda, Newberry, Orangeburg, Richland, Calhoun, Sumter
NeighborhoodHELP Project	2014	FL	Florida International University College of Law	Florida International University Herbert Werheim College of Medicine	Law School Funding	Miami- Dade
Grace Medical Home MLP	2018	FL	Community Legal Services of Mid-Florida	Grace Medical Home	FL Bar Funding (Project Specific)	Orange
Greenville MLP	2016	SC	South Carolina Legal Services	Prisma Health	LSC Operating Funds Health System, Foundation/Charitable Giving	Cherokee, Union, Spartanburg, Oconee, Pickens, Anderson, Greenwood, Laurens, Greenville
Health Law Partnership	2004	GA	Atlanta Legal Aid Society, Georgia State College of Law	Children's Healthcare of Atlanta	Health System, LSC Operating Funds, Foundation/Charitable Giving	All 159
Health Rights Clinic	2005	FL	University of Miami School of Law	South Florida AIDS Network, University of Miami Miller School of Medicine	Law School Funding	Miami-Dade
Healthy Kids MLP	2018	FL	Southern Legal Counsel	UF Health Department of Pediatrics	FL Bar Foundation (Project Specific)	Dixie, Bradford, Columbia, Putnam, Alachua, Levy, Gilchrist, Clay, Marion, Union
HIV Law Project	1996	FL	Coast to Coast Legal Aid of South Florida, Legal Aid Service of Broward County	FL Department of Health, Memorial Healthcare, Nova Southeastern University Dental, Care Resource Center, AIDS Healthcare Foundation	Government Contract/Grant	Broward
Manasota MLP	2008	FL	Legal Aid of Manasota	Sarasota Memorial Internal Medicine Practice at Newton	FL Bar Foundation (Project Specific)	Sarasota
Palm Beach MLP	2008	FL	Legal Aid Society of Palm Beach County	C.L. Brumback Primary Care Clinics	Foundation/Charitable Giving, FL Bar Foundation (Project Specific), FL Bar Foundation (Operating Funds), Health Center Funding, Government contract/Grant	Palm Beach

MLP NAME	YEAR EST.	STATE	LEGAL PARTNER(S)	HEALTH CARE PARTNER(S)	FUNDING	COUNTIES SERVED
MedLaw	2016	GA	Georgia Legal Services Program, Mercer University School of Law	Navicent Health	LSC Operating Funds, Health System	Jasper, Montgomery, Peach, Wilkinson, Bleckley, Crawford, Dodge, Houston, Hancock, Johnson, Monroe, Telfair, Wheeler, Jones, Laurens, Pulaski, Twiggs, Putnam, Treutlen, Baldwin, Bibb, Butts, Lamar
Memphis CHiLD	2015	TN	Memphis Area Legal Services, University of Memphis Cecil. C Humphreys School of Law	Le Bonheur Children's Hospital, University of Tennessee Health Sciences Center	Foundation/Charitable Giving, Health System, Law School Funding	Shelby, Fayette, Lauderdale, Tipton
Northeast Florida MLP	2002	FL	Jacksonville Area Legal Aid	Wolfson Children's Hospital, Sulzbacher Village FQHC	Health System, FL Bar Foundation (Project Specific), Foundation/ Charitable Giving	Duval, Nassau, St. Johns, Clay
Partners in Health	2014	FL	Legal Aid Society of the Orange County Bar Association	Advent Health	Not reported	Orange
Pinellas County MLP	2018	FL	Bay Area Legal Services	Community Health Centers of Pinellas	Foundation/Charitable Giving	Pinellas
UF Health Senior MLP	2018	FL	Three Rivers Legal Services	UF Health Shands Hospital	Government Contract/Grant	Gilchrist, Hamilton, Lafayette, Nassau, St. Johns, Baker, Bradford, Clay, Union, Columbia, Levy, Suwannee, Alachua, Duval, Dixie, Madison, Taylor
Veteran's Advocacy, Legal Outreach & Representation (VALOR) Project	2011	FL	Coast to Coast Legal Aid of South Florida	Bill Kling VA Clinic	Government Contract/Grant	Broward
Veteran's Advocacy, Legal Outreach & Representation (VALOR) Project	2014	FL	Legal Aid Society of the Orange County Bar Association	Legal Aid Society of the Orange County Bar Association	Orlando VA Hospital	Orange, Osceola, Seminole
Viera VA MLP	2015	FL	Community Legal Services of Mid-Florida	Viera VA Outpatient Center	LSC General Operating Funds	Brevard
West Volusia MLP	2016	FL	Community Legal Services of Mid-Florida	West Volusia Hospital Authority	Health System	Volusia (West)