

AUGUST 2023

# ENVIRONMENTAL SCAN OF MEDICAL-LEGAL PARTNERSHIPS IN HEALTH CENTERS

By the National Center for Medical-Legal Partnership



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## Medical-Legal Partnerships in Health Centers

A medical-legal partnership (MLP) is an intervention that embeds civil legal aid professionals within a health care organization to address health-harming social issues that have remedies in civil law. This is commonly implemented through an arrangement known as a memorandum of understanding (MOU) or other agreement with a civil legal aid organization or other pro bono services to facilitate the provision of legal services to patients.

This environmental scan presents up-to-date information<sup>1</sup> about MLPs operating in Federally Qualified Health Centers (FQHCs) and Look-Alike<sup>2</sup> programs (referred to as ‘health centers’ throughout). Health centers were created under Section 330 of the Public Health Service Act and are administered by the Health Resources and Services Administration (HRSA) to provide comprehensive preventative and primary care to under-resourced communities, including many residents that are likely to have unmet legal needs. There are about 1,500 FQHCs and look-alikes across the US.<sup>3</sup>

In 2014, HRSA recognized civil legal aid as an “enabling service” that health centers could include under their federal grants.<sup>4</sup> This change prompted growth in the number of health centers establishing MLPs. These HRSA-funded health centers have become a fast-growing sector for MLP adoption because they have substantial knowledge about the communities they serve and provide care to the most vulnerable and underserved populations by design.<sup>5</sup> MLPs in health centers make legal services more accessible to patients, especially those with urgent social needs who may not otherwise seek legal help or not recognize the practical help that legal services can provide.<sup>5</sup> They assist patients in addressing legal needs related to: education, employment, housing, legal status, personal and family stability, and public benefits among others.

## Conducting the Health Center MLP Environmental Scan

A screening questionnaire was sent to health center administrators from FQHCs and LALs to determine whether their health center had an MLP, and to identify the health center's screening and referral practices related to patient legal needs. Health center administrators were sent an email containing an individualized and sharable link to complete the questionnaire via SurveyMonkey. If a health center was determined to have an MLP, the respondent was asked to provide a point-of-contact for their health center MLP. The screening questionnaire was distributed in February 2023 and yielded a 20% response rate.

If the health center was determined to have an MLP, a follow-up questionnaire was sent via email to the MLP point-of-contact to ask about the characteristics of the health center's MLP. In total, we identified 99 health centers that reported having a MLP. An additional 66 health centers indicated that they were in the planning stages of establishing a MLP. Of the health center MLPs identified, 58 responded to the MLP characteristics questionnaire, resulting in a 59% response rate.

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**GIVEN THE NUMBER OF MLPs IDENTIFIED IN THIS ENVIRONMENTAL SCAN, WE ESTIMATE THERE ARE APPROXIMATELY 150 TO 200 MLPs IN HEALTH CENTERS WITH AN ADDITIONAL 100 TO 150 IN THE PLANNING STAGES.\***

*\*Our estimates of health centers with active and planned MLPs are based on our assumption that respondents to the questionnaire were more likely to have an interest in MLPs or have an active MLP than the full census of health centers. At the same time, we believe there are additional active and planned MLPs in health centers that did not respond to our questionnaire. In other words, we likely undercount the true number of MLPs in health centers.*

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## Growth of MLPs in Health Centers

- MLPs in health centers are in 27 states across the country including Washington, D.C., and the US territories.
- Three-quarters (76%) of these MLPs were established after 2014. In 2014, civil legal aid was deemed an “enabling service” by HRSA.<sup>7</sup>

**FIGURE 1. MOST HEALTH CENTERS ADDRESS THEIR PATIENT'S HEALTH-RELATED LEGAL NEEDS THROUGH SCREENING AND REFERRALS**

**72%**

Health centers that screen patients for potential health-harming legal needs

**63%**

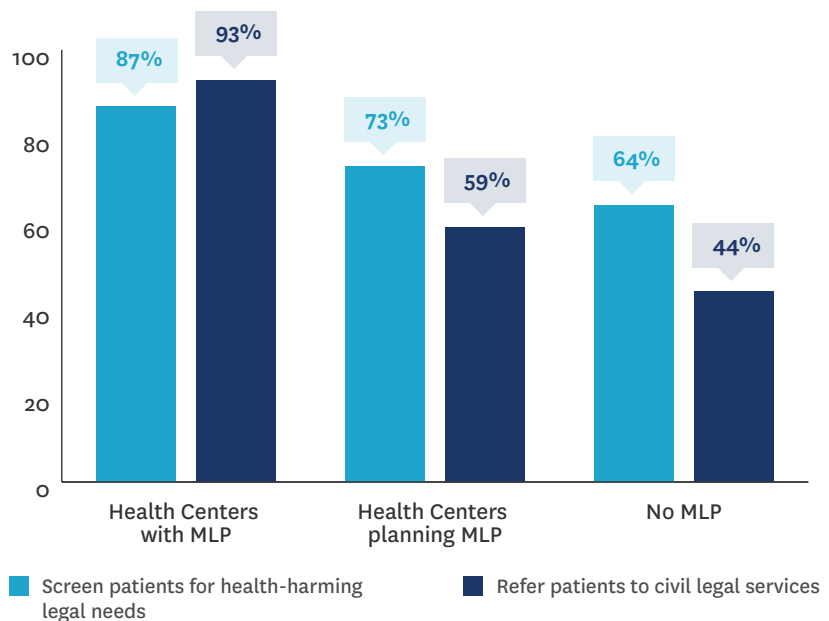
Health centers that refer patients with health-harming legal needs to civil legal services

## How Health Centers Address the Health-Related Legal Needs of their Patients

**Most health centers screen for legal needs and refer patients to civil legal services.**

- According to responses from health center administrators, 72% of health centers screen patients for health-harming legal needs which include: housing or utilities, income or insurance, employment, education, legal status, and personal and family stability among other issues. **See Figure 1.**
- Health centers with a MLP were more likely to screen for health-related legal needs and provide referral services to civil legal aid compared to other health centers without a MLP. **See Figure 2.**
- Health centers in the planning stages for an MLP were also more likely to screen and refer than health centers without any MLP activity. MLPs in health centers often target specific populations or specific legal needs.

**FIGURE 2. HEALTH CENTERS WITH AN MLP ARE MORE LIKELY TO OFFER SCREENING AND REFERRAL SERVICES FOR THEIR PATIENTS**



## MLP Questionnaire Respondent Spotlight



### Health Center

FQHC

### Location

New Orleans, Louisiana

### Established

Before 2014

### Patients Served

Up to 500 annually

“Our MLP works holistically at the intersection of health and health-harming legal needs and works collaboratively with community-based organizations and other vulnerable populations.”

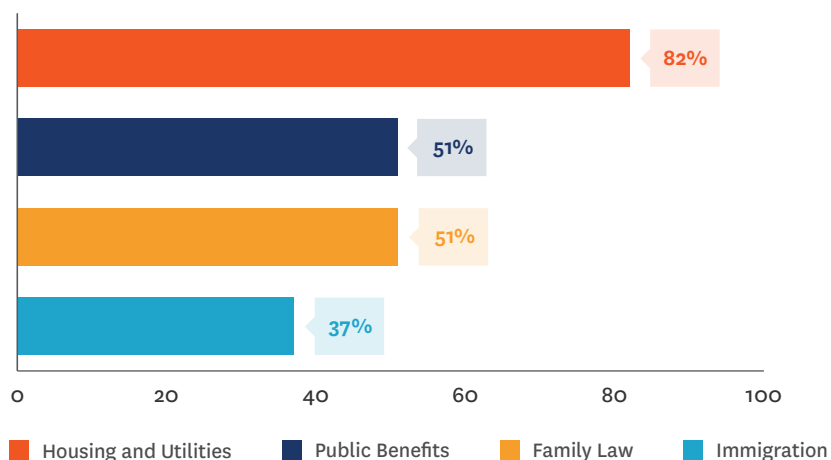


TO LEARN MORE, VISIT:  
<https://www.crescentcare.org/service/cc-legal-services/>.

## MLPs in health centers often target specific populations or specific legal needs.

- Half of MLPs in health centers (51%) reported specializing or working with certain conditions or populations. For example, some MLPs assist people with HIV or other chronic conditions, those with low incomes, or individuals experiencing homelessness. MLPs also reported working with families and children, Latino communities, and immigrants.
- Legal issues related to housing and utilities were addressed by a majority of MLPs in health centers (82%). The most common legal issues addressed by MLPs include those related to housing and utilities, public benefits, family law, and immigration. **See Figure 3.**

**FIGURE 3. MOST COMMON LEGAL ISSUES ADDRESSED BY MLPs IN HEALTH CENTERS**



*Note: This table represents the percent of respondents that indicated the legal issue as one of their top three legal issues addressed by the MLP. We identified four issues that MLPs commonly addressed across all respondents.*

## Challenges for Sustainability for MLPs in Health Centers

### FUNDING CHALLENGES:

MLPs in health centers commonly cited funding challenges as a top concern or obstacle for expanding or sustaining their MLP program.

- Most MLPs (80%) cited the need for stable and permanent funding as a challenge. **See Figure 4.**
  - 63% of MLPs in health centers reported receiving external funding from donations, foundations, grants, or payment from insurance payers.

## MLP Questionnaire Respondent Spotlight



### Health Center

FQHC

### Location

Grand Rapids, Michigan

### Established

After 2014

### Patients Served

Up to 100 annually

“We hope to grow our MLP by expanding MLP services to reach all of our health center sites, hiring our own health center-based attorney, and contracting with more local legal agencies.”

**TO LEARN MORE, VISIT:**  
<https://cherryhealth.org/patient-resources/medical-legal-partnership/>

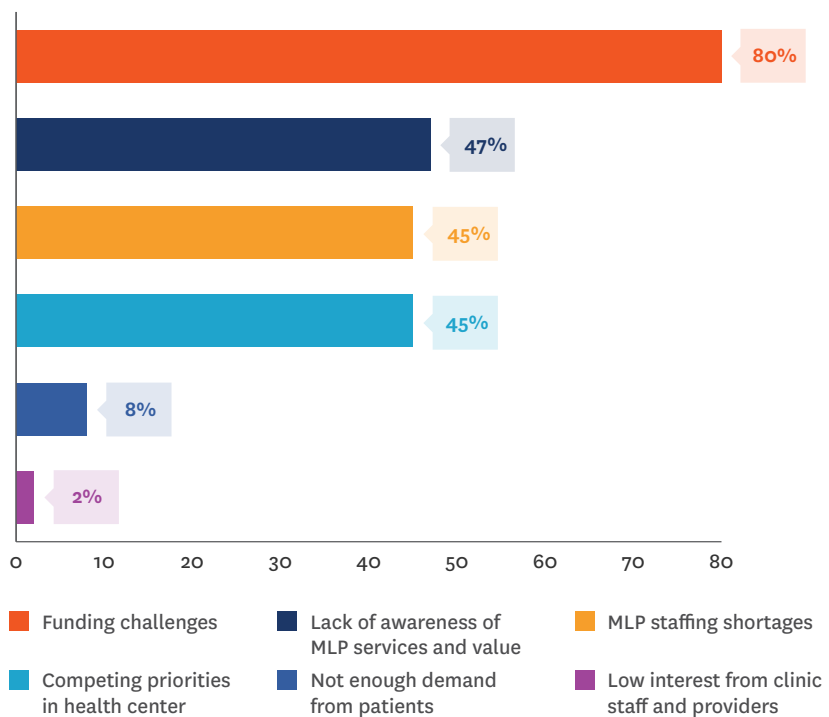
- Most of these MLPs also cited the need for stable and permanent funding as a challenge.
- At least a dozen health centers indicated that they no longer have an MLP, primarily because of a lack of funding.

### OTHER MAJOR CHALLENGES:

According to MLP respondents, other challenges for sustaining and expanding MLPs in health centers include a lack of awareness of the program’s services and value, staffing shortages, and competing priorities in the health center.

- Notably, interest from clinic staff and providers as well as demand from patients were not concerns for most MLPs in health center.

**FIGURE 4. CHALLENGES ASSOCIATED WITH SUSTAINING OR EXPANDING MLP PROGRAM**



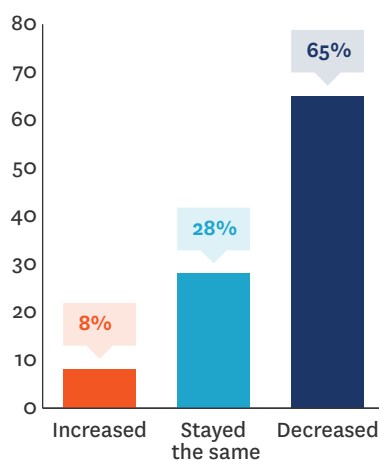
Note: This table represents the percent of respondents that indicated that these issues are among their top three challenges for expanding or sustaining MLP operations.

## How the COVID-19 Pandemic Impacted MLPs in Health Centers

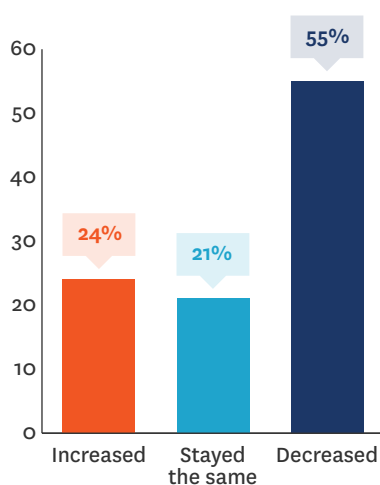
The COVID-19 pandemic shifted how MLPs were able to operate and address patient needs at health centers.

- A shift to telehealth and overall lower patient volumes during the pandemic contributed to a decrease in MLP interactions with patients. MLPs often rely on a “warm handoff”<sup>8</sup> to facilitate trust and rapport between the patient and legal professional, and COVID-19 interrupted this vital interaction.
  - 65% of MLPs reported a decrease in in-person interaction with health center patients.
  - The number of patient referrals to the MLP and clients served by the MLP also decreased in health centers as a result of the pandemic.
- Despite these challenges, some important components of health center MLP operations stayed the same throughout the pandemic. For example, health center MLPs were able to maintain funding for their MLP, the dedicated time from the legal professional remained the same, and MLPs were able to address the same variety of legal issues.
- Two-thirds (63%) of MLPs are currently maintaining an on-site presence at health centers.

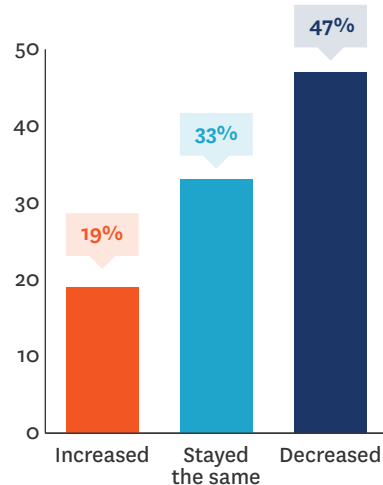
**FIGURE 5. MLP IN-PERSON INTERACTION DECREASED DURING THE PANDEMIC**



**FIGURE 6. PATIENT REFERRALS TO MLP DECREASED DURING THE PANDEMIC**



**FIGURE 7. THE NUMBER OF CLIENTS SERVED BY THE MLP DECREASED DURING THE PANDEMIC**



## MLP Questionnaire Respondent Spotlight

# ESKENAZI HEALTH

### Health Center

FQHC

### Location

Indianapolis, Indiana

### Established

Before 2014

### Patients Served

Over 500 annually

“Our Medical-Legal Partnership has been able to thrive and be sustained over the last 15 years because of our organization’s commitment to its values and mission of serving the vulnerable in our community.... The MLP is really just one piece of addressing social determinants of health, and we’re so fortunate to be part of this broader effort.”



### TO LEARN MORE, VISIT:

<https://www.eskenazi-health.edu/programs/medical-legal-partnership>

## Takeaways from the MLP Environmental Scan

HRSA-funded health centers (including FQHCs and look-alike programs) were created to reach people in under-resourced and medically underserved communities, making them more likely to serve those with health harming legal needs. Integrating MLPs into health center care teams can provide accessible legal aid to people and communities that may not otherwise seek out legal aid or have access to these services.

While it is difficult to estimate the exact number of MLPs in health centers, there continues to be interest and growth in the field.

- We estimate that there are **150–200** MLPs in health centers and **100–150** health centers with MLPs in the planning stages.<sup>9</sup>
- Our environmental scan indicates that approximately **20%** of health centers have a currently operating MLP or are interested in developing one.
- Several existing MLPs also have plans to expand and grow their programs by adding MLP staff, serving additional health center sites, or increasing the dedicated time from the legal professional at the health center.
- Permanent and stable funding for MLPs, however, continues to be a challenge for many health centers.

The environmental scan of MLPs in health centers has revealed opportunities to better understand these programs including taking a closer look at the different patient populations and specific legal issues addressed by MLP, how to establish reliable and stable funding for long-term MLP sustainability, and measuring outcomes of MLP interactions and services.

## Resources Available to Health Centers

The National Center for Medical-Legal Partnership (NCMLP), a HRSA-funded National Training and Technical Assistance Partner. Engages in education, research, and technical assistance to advocate for the integration of legal services in health care and help health care organizations leverage legal services to better address health-related social needs.<sup>10</sup> NCMLP has developed several resources and convenes stakeholders to help health care organizations establish and maintain MLP programs. In 2020, NCMLP developed a [toolkit](#) that can be used by health centers with an MLP or actively pursuing an MLP to help them establish, strengthen, and sustain an MLP.<sup>11</sup> NCMLP also creates resources like the issue brief, [Financing Medical Legal Partnerships: View from the Field](#), that describes funding models for MLPs and how MLPs adapt to meet funding challenges.<sup>12</sup>



**VIEW WEBINAR FOR FINDINGS  
AND EXAMPLES OF THE SCAN**

## ENDNOTES

- 1 The National Center for Medical-Legal Partnership (NCMLP) periodically surveys the MLP field to understand the landscape and meet the needs of partnerships. The last annual MLP survey was administered by NCMLP in 2019 and subsequently placed on pause as a result of the pandemic. As a HRSA-funded National Training and Technical Assistance Partner, NCMLP utilized American Rescue Plan funding to conduct a Health Center-focused MLP Environmental Scan aimed at increasing our understanding of the accessibility, availability, and capacity of MLPs to meet the evolving needs of Health Center patient populations.
- 2 A Health Center Program look-alike is a community-based health care provider that meets the requirements of the HRSA Health Center Program, but they do not receive Health Center Program funding from HRSA and do not receive health center FTCA protections. To learn more, visit: <https://bphc.hrsa.gov/funding/funding-opportunities/health-center-program-look-alikes>.
- 3 Health Resources & Services Administration. Health Center Program: Impact and Growth. BPHC.HRSA.gov. Updated August 2022: <https://bphc.hrsa.gov/about-health-centers/health-center-program-impact-growth>.
- 4 Health Resources & Services Administration. Rule change: HRSA recognizes civil legal aid as “enabling service” for health centers. BPHC.HRSA.gov. Published October 2014: <https://medical-legalpartnership.org/mlp-resources/enabling-services/>.
- 5 Williamson A, Trott J, Regenstein M. Health Center-Based Medical-Legal Partnerships Where They Are, How They Work, and How They Are Funded. Medical-legalpartnership.org. Published 2018: <https://medical-legalpartnership.org/wp-content/uploads/2017/12/Health-Center-based-Medical-Legal-Partnerships.pdf>.
- 6 Marple K, Curran M, Lawton E, Rahajason, D. Bringing Lawyers onto the Health Center Care Team to Promote Patient & Community Health. Medical-legalpartnership.org. Published October 2020: <https://medical-legalpartnership.org/wp-content/uploads/2020/10/Health-Center-MLP-Toolkit-FINAL.pdf>.
- 7 Health Resources & Services Administration. Rule change: HRSA recognizes civil legal aid as “enabling service” for health centers. BPHC.HRSA.gov. Published October 2014: <https://medical-legalpartnership.org/mlp-resources/enabling-services/>.
- 8 A warm handoff is typically conducted in-person. In this case, a health care provider or staff will connect the patient to the MLP staff or legal professional at the health center at the time of the visit. This helps establish trust and rapport between the patient and MLP staff.
- 9 Our estimates of health centers with active and planned MLPs are based on our assumption that respondents to the questionnaire were more likely to have an interest in MLPs or have an active MLP than the full census of health centers. At the same time, we believe there are additional active and planned MLPs in health centers that did not respond to our questionnaire. In other words, we likely undercount the true number of MLPs in health centers.
- 10 To learn more about the National Center for Medical-Legal Partnership, visit: <https://medical-legalpartnership.org/>.
- 11 Marple K, Curran M, Lawton E, Rahajason, D. Bringing Lawyers onto the Health Center Care Team to Promote Patient & Community Health. Medical-legalpartnership.org. Published October 2020: <https://medical-legalpartnership.org/wp-content/uploads/2020/10/Health-Center-MLP-Toolkit-FINAL.pdf>.
- 12 Trott J, Peterson A, Regenstein M. Fact Sheet: Financing Medical-Legal Partnerships. Medical-Legalpartnership.org. Published April 2019: <https://medical-legalpartnership.org/mlp-resources/financing/>.



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 totaling \$691,829 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](http://HRSA.gov).

## MISSION

The mission of the National Center for Medical-Legal Partnership (NCMLP) is to improve the health and well-being of people and communities by leading health, public health, and legal sectors in an integrated, upstream approach to combating health-harming social conditions. Over the past several years, NCMLP has helped increase the number of medical-legal partnerships in the U.S. to nearly 300. These partnerships serve children, chronically ill adults, the elderly, Native Americans, and veterans. NCMLP spearheads this work in four areas: (1) transforming policy and practice across sectors; (2) convening the field; (3) building the evidence base; and (4) catalyzing investment.

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