Integrating Legal Services with Health Care Services for Individuals with Complex Health and Social Needs

The Blueprint for Complex Care describes complex care as “a person-centered approach to address the needs of people who experience combinations of medical, behavioral health, and social challenges that result in extreme patterns of healthcare utilization and cost.” Examples of individuals with these complex needs include: Adults under age 65 with disabilities; frail older adults; people with multiple chronic conditions; people with behavioral health and social needs; and people with advanced illness.

Many people with complex health needs confront social needs such as housing instability or homelessness, immigration challenges, criminal system involvement, unlawful disenrollment from federal or state disability benefits, and the absence of paperwork to guide responsible medical decision-making. While these needs have a significant impact on the health and wellbeing of individuals, the health care system is not equipped to address these needs. However, many social needs have legal solutions that can be addressed through a medical-legal partnership (MLP). Medical-legal partnerships integrate civil legal services professionals into the clinical care team to address patients’ unmet social needs that may be contributing to or exacerbating complex health conditions. MLPs have demonstrated initial success in improving both physical and mental health conditions as well as stabilizing income and housing for patients with complex conditions while also curbing costly overuse of health care services by addressing the root causes of patients’ problems.\(^2\,^3\)
### How Legal Services Help Address Complex Health and Social Needs

<table>
<thead>
<tr>
<th>COMMON SOCIAL NEEDS</th>
<th>HOW LEGAL SERVICES CAN HELP</th>
<th>IMPACT ON HEALTH/HEALTH CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ECONOMIC STABILITY</strong></td>
<td>• Appeal denials of public benefits, health insurance, cash benefits, and disability benefits.</td>
<td>• Additional financial support means fewer trade-offs between affording food and health care, including medications.</td>
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<tr>
<td>Food Security &amp; Housing Security</td>
<td>• Secure housing and prevent unwarranted and illegal evictions.</td>
<td>• Decreased homelessness and transiency can improve attendance at medical appointments, concentration, and behavior.</td>
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<td></td>
<td>• Expunge excessive and inaccurate charges on credit reports by landlords.</td>
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<tr>
<td><strong>HEALTH AND HEALTH CARE</strong></td>
<td>• Ensure emergency access to insurance benefits.</td>
<td>• Increased access to health services, medical care, and medications improve treatment for acute and chronic illnesses.</td>
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<td>Insurance &amp; Access to Health Care</td>
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<tr>
<td><strong>NEIGHBORHOOD AND BUILT ENVIRONMENT</strong></td>
<td>• Improve substandard conditions and habitability.</td>
<td>• Access to, and quality of, affordable housing free of environmental hazards reduces the risk of adverse health outcomes, like asthma and chronic obstructive pulmonary disease.</td>
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<td>Quality, Affordable Housing</td>
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<tr>
<td><strong>SAFE HOMES AND SOCIAL SUPPORTS</strong></td>
<td>• Assist in securing custody and guardianship for children.</td>
<td>• Stable family relationships significantly reduce stress and allow for better decision-making, including decisions related to health care.</td>
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<td>• Reduce garnishment of wages for child support.</td>
<td>• Safe housing for justice-involved populations assists individuals in transitioning back into society and engaging in health care services.</td>
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<td></td>
<td>• Secure safe housing for returning citizens involved in the justice system.</td>
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<tr>
<td><strong>EQUAL ACCESS TO WORK AND EDUCATION</strong></td>
<td>• Prevent employment and education discrimination.</td>
<td>• Education is one of the greatest predictors of a person’s adult health, and receiving higher education translates to improved lifestyle and greater health outcomes.</td>
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<tr>
<td></td>
<td></td>
<td>• Increased employment opportunities are part of a pathway out of homelessness and poverty.</td>
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</tbody>
</table>

The information in this chart was derived from the messaging guide, “Framing Legal Care as Health Care.”
MEETING PEOPLE WHERE THEY ARE:

Bringing Legal Services Directly to Individuals with Complex Health and Social Needs

To address common legal needs, health care organizations develop medical-legal partnerships to provide patients with legal services for issues that directly affect their health, further increasing the efficacy of health interventions. MLPs integrate legal services and expertise into health care settings. Lawyers become an important part of the health care team, taking referrals and providing consultations just like any other specialist. Health care and legal professionals identify problems like those outlined in the chart on page two, and together, they establish protocols and interventions to address many of these needs at the health care site. It is a highly flexible intervention that can be adapted to meet the needs of a specific population and setting. While MLPs are adaptable and customizable, these partnerships typically have eight core elements in common. Most partnerships:

1. **HAVE A “LAWYER IN RESIDENCE”** who works on-site at the health care organization;

2. **HAVE A FORMAL AGREEMENT** between the participating health and legal organizations outlining responsibilities and services.

3. **DEFINE A TARGET POPULATION** to receive services;

4. **SCREEN PATIENTS FOR HEALTH-HARMING LEGAL NEEDS** to find those patients who might not otherwise have their health-harming legal needs identified or addressed;

5. **HAVE DEDICATED LEGAL STAFFING** to provide MLP services at the health care organization;

6. **TRAIN HEALTH CARE PROVIDERS ON COMMON SOCIAL DETERMINANTS OF HEALTH** and how legal expertise and services can help mitigate the negative impact of social determinants on health and health care;

7. **SHARE INFORMATION** about patients between health and legal staff to solve health-harming legal problems or address social determinants; and

8. **DESIGNATE FINANCIAL RESOURCES** to support the medical-legal partnership activities.

DOWNLOAD MLP TOOLS

Sample Memorandums of Understanding, a legal needs screener, trainings, and other tools for operating a medical-legal partnership are available for free download at:

www.medical-legalpartnership.org/resources
Medical-Legal Partnership in Practice

IDENTIFYING LEGAL NEEDS IN COMPLEX CARE SETTINGS

Legal needs are typically identified through a standardized screening process, often as part of an organization’s broader social determinant of health screening process. The National Center for Complex Health and Social Needs suggests two resources for communities wishing to explore screening options: The American Academy of Family Physicians’ Social Determinants of Health: Guide to Social Need Screening Tool and Resources, and the Center for Health Care Strategies’ Screening for Social Determinants of Health in Populations with Complex Needs: Implementation Considerations. In addition, the National Center for Medical-Legal Partnership offers a legal needs screening tool through its website.

A TEAM-BASED APPROACH TO RECOVERY

Since November 2017, the Camden Coalition of Healthcare Providers has offered legal services to patients with complex health and social needs through a partnership with Rutgers Law School. Their medical-legal partnership has addressed a variety of housing, disability, employment, and criminal justice issues that were negatively affecting individuals’ well-being and often standing in the way of effective medical treatment.

Many of the cases that the Camden Coalition’s medical-legal partnership has handled are on behalf of individuals with multiple complex physical and mental health conditions who also face other social barriers. Legal services are offered as part of the Camden Coalition’s enhanced care management program, which helps patients engage with and navigate the intersection between their health care and social needs more effectively. For example, the Camden Coalition’s medical-legal partnership played a pivotal role in securing housing for Charlie Vazquez, one patient with complex health and social needs. Now able to better manage his health, Charlie reflected that the support he received from the Camden Coalition’s enhanced care management program and medical-legal partnership gave him “a sense of hope and direction.” Read Charlie Vazquez’s full story on the Camden Coalition website. A similar high-intensity, team-based care management model demonstrated a 37 percent reduction in unplanned hospital readmissions among 149 high-cost, high-use Medicare beneficiaries in four states by addressing patients’ social determinants of health and connecting them to community-based services.

“[The Camden Coalition’s medical-legal partnership attorney] went to court for me and helped to get me housing. That was the biggest event of my life.”

CHARLIE VAZQUEZ, PATIENT
CAMDEN COALITION OF HEALTH CARE PROVIDERS, NEW JERSEY
Four Ways Public Interest Law Resources Are Integrated into Complex Care Delivery

**Care Connections**
LANCASTER GENERAL HOSPITAL
Lancaster, Pennsylvania

Care Connections is an intensive, transitional, primary care practice that cares for persons with complex medical and psychosocial issues who have had significant inpatient health care utilization. The team consists of an MLP attorney working side-by-side with care managers, medical and behavioral health providers, care navigators, engagement specialists, pharmacists, social workers, and a chaplain. The clinic provides a holistic medical home for a defined period while issues related to a patient’s social determinants of health can be evaluated, triaged and mitigated.

**Whole Person Care**
LOS ANGELES COUNTY, CALIFORNIA

Whole Person Care is Los Angeles County’s §1115 Medicaid Waiver Program that provides complex care management for high-risk, high-cost, and/or high-utilizing individuals, including those who:
- Are homeless;
- Are justice-involved;
- Have chronic mental health conditions;
- Have chronic substance use conditions;
- Have multiple chronic physical health conditions; and/or
- Are high-risk perinatal women.

Whole Person Care is a community health worker-driven program. To support the program’s team-based approach to care, a virtual medical-legal partnership model utilizing on-line referrals and secure feedback to providers is used. This model ensures that legal assistance can be provided across all of Los Angeles County for Whole Person Care participants. Los Angeles County has partnered with Neighborhood Legal Services of Los Angeles County, Legal Aid Foundation of Los Angeles, Inner City Law Center, Bet Tzedek Legal Services, and Mental Health Advocacy Services to provide legal services.

**The “Complicated Discharge” Committee**
UNIVERSITY OF NEBRASKA MEDICAL CENTER
Omaha, Nebraska

In 2015, a group of Social Workers and Care Transitions Nurses at Nebraska Medicine formed what is known as the Complicated Discharge Committee. This Committee is charged with reviewing cases that present with barriers to hospital discharge and identifying solutions to those barriers. As part of those solutions, the Nebraska Medical-Legal Partnership works with the committee to resolve legal issues identified as barriers to discharge.

**High Touch, High Trust (HT2)**
BOSTON MEDICAL CENTER
EMERGENCY DEPARTMENT
Boston, Massachusetts

This project in-progress, sponsored by the Massachusetts Health Policy Commission, integrates Community Wellness Advocates (CWAs) within the adult Emergency Department at New England’s largest safety net hospital. The CWAs screen patients for medical and behavioral health needs as well as social determinants of health, and problem-solve with patients as they wish in order to improve their overall health and well-being. This program offers 6 months of intensive case management services—both in a clinical setting as well as at home—to patients who have 4 or more ED visits in one year. An attorney employed by MLPB (formerly known as Medical-Legal Partnership | Boston) embeds within a weekly interdisciplinary case review meeting, and offers real-time identification of patients’ legal risks, rights and remedies during case presentations. The legal partner also is available outside of standing case review to consult with the CWAs about legally-informed problem-solving strategies. Finally, MLPB facilitates—for a small subset of patients with acute/complex legal needs—“safe hand-offs” to MLPB-curated legal specialists for high-quality, free legal representation, through a range of resources including pro bono volunteers and a “rapid response” eviction defense subcontractor.
Funding for Medical-Legal Partnerships

Broadly speaking, medical-legal partnership programs are funded through sources from three primary sectors: (1) the healthcare community; (2) the legal community; and (3) private and corporate philanthropy.

The four programs spotlighted on page five are funded through the following mechanisms, respectively:

- **Care Connections** is funded primarily through dedicated health system funding, with an innovation grant from the state of Pennsylvania and local United Way.

- **Whole Person Care Los Angeles** is a Medicaid §1115 Waiver Program that uses a 1:1 local:federal match to fund the committed services.

- **The Complicated Discharge Committee** partnership is funded by Nebraska Medicine.

- **High Touch, High Trust** has a state innovation grant award.

At the planning stage, any complex care program contemplating integration of legal services should focus on defining return on investment (ROI) measures and related evaluation strategies, all of which will drive sustainability prospects.

INPATIENT AND EMERGENCY DEPARTMENT USE DROPPED

- **50 PERCENT**

OVERALL HEALTH COSTS WENT DOWN

- **45 PERCENT**

VETERANS EXPERIENCING HOMELESSNESS & MENTAL ILLNESS

An 18-month study of 950 Veterans in Connecticut and New York who were experiencing mental illness, homelessness, or both found that Veterans who received full legal representation:

IN THE FIRST 3 MONTHS, SHOWED SIGNIFICANT REDUCTIONS IN SYMPTOMS OF HOSTILITY, PARANOIA, PSYCHOSIS, GENERALIZED ANXIETY DISORDER, AND PTSD

INFANTS

A randomized control trial at Boston Medical Center incorporated medical-legal partnership services into an intervention for families of healthy newborns receiving primary care. Low-income families assigned to the intervention group were found to have an:

INCREASE IN USE OF PREVENTATIVE HEALTH CARE

LEARN MORE

Additional resources about MLP in complex care settings related to the opioid crisis, payment reform, health centers, Veterans, and more can be found at:

[www.medical-legalpartnership.org/resources](http://www.medical-legalpartnership.org/resources)
Endnotes


