

Grant Outcomes Report

An Initiative to Create or Strengthen Medical-Legal Partnerships to Better Serve The Needs of Low-Income Patients with Serious and/or Chronic Illnesses

I. Executive Summary

New York Legal Assistance Group's (NYLAG) LegalHealth division leads, "The LegalHealth Technical Assistance Project." The project seeks to strengthen existing medical-legal partnerships (MLPs) and help create new ones to better serve the needs of low-income patients with serious and/or chronic illnesses who are struggling with legal issues that could affect their health, treatment, and/or access to medical care. LegalHealth was created in 2001 and has worked with legal and medical professionals throughout the New York City metropolitan region. LegalHealth wanted to expand its model to New York State after other groups and agencies statewide sought its counsel on how to develop and operate medical-legal partnerships. The project was primarily focused on establishing a framework and communication channels with which to provide technical support, such as forms and guidance, and information sharing of best practices, expertise, ideas, and challenges. The project led to the creation of the New York State Coalition of Medical-Legal Partnerships, a network of medical and legal professional groups across New York State. Although this coalition was not part of the original grant strategy, its creation helped expedite the grant's objectives, brought attention to the need for MLPs, strengthened LegalHealth's model, and contributed to the creation of pending State legislation supporting this model.

II. The Problem

New Yorkers with limited resources, particularly low-income individuals and immigrants, need assistance when facing the diagnosis and treatment of a serious or chronic illness. These individuals face potentially life-threatening barriers, such as being denied access to public or private health insurance and therefore being denied access to treatment, private insurance disputes that result in denials of experimental treatments, surgical procedures, medications, etc., making end-of-life decisions, such as guardianship of minor children, and being denied other benefits, such as Social Security Disability or other social programs, like home/transitional care. These underserved populations also face obstacles in

KEY INFORMATION:

GRANTEE

New York Legal Assistance Group

GRANT TITLE

LegalHealth Technical Assistance Project

DATES

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GRANT AMOUNT

\$115,016

the workplace that are related to a diagnosis, including denial of income, health benefits, and provisions under the Federal Family Medical Leave Act, as well as at home, such as maintaining affordable housing and threats of eviction.

“When LegalHealth was created in 2001 we had one of the few medical-legal partnership models in the country and people were asking us about our model,” said Randye Retkin, LegalHealth Director who led the project. “The goal is to help clients so they can concentrate on their health and not be distracted by legal matters. We’ve had people miss chemotherapy appointments because they’re dealing with a legal problem, such as a housing eviction. They have to go to housing court or be evicted so they forgo their medical appointments.”

III. Grant Strategy

The LegalHealth Technical Assistance Project was created to help these underserved, under-resourced patients by bridging legal and medical services and strengthening MLPs to help patients and their families better navigate these two complex systems. The goal of this project was to create a framework that would provide coordinated technical assistance to other free civil legal service programs, hospitals, and community health centers across New York State so that underserved populations could better access high-quality health care services, medical/social benefits, and workplace protections that they are entitled to under state and Federal laws.

IV. Grant Activities

The first four months of the project focused on raising awareness about the need for MLPs that serve low-income and under-resourced patients and their families. To do this, LegalHealth representatives conducted outreach activities with existing legal and medical professional groups, a statewide network

EXPECTED OUTCOMES

Under this grant, LegalHealth sought to:

- Raise awareness about how MLPs work to help better meet the needs of low-income, immigrant, and other underserved populations in New York State via a direct mail campaign and other outreach activities.
- Develop, expand, and support medical-legal partnerships and provide a framework for technical assistance to the existing statewide network of free civil legal service organizations, hospitals, and community health centers.
- Offer technical assistance to 15–20 regionally diverse MLPs that focus on the underserved.
- Demonstrate to other public interest lawyers an effective and cost-efficient way of implementing legal intervention into health care services for the poor.

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that included: the Legal Aid Society, Legal Services of New York, Legal Services of Central New York, the Empire Justice Center, the New York State Bar Association, the Women's Bar Association of the State of New York, the New York State Academy of Family Physicians, the Medical Society of the State of New York, the Community Health Care Association of New York State, and various law school programs. LegalHealth developed outreach materials to send to these legal and medical professionals to increase awareness.

Although LegalHealth's objectives remained the same, it realized after the outreach phase that an effective approach to expanding its model would be to create a coalition to formalize a statewide effort. LegalHealth formed the New York State Coalition of Medical-Legal Partnerships in spring 2008 during the course of the project. The Coalition held quarterly meetings either in person or via conference call, and then held a major membership meeting in spring 2009 in Syracuse, New York. This was an opportunity to bring together disparate groups, including approximately 90 lawyers, physicians, social workers, and other professionals to share experiences, ideas, best practices, and needs for going forward.

The creation of the Coalition helped provide a framework for technical assistance activities, such as working groups, conferences, committees, and onsite visits. The meetings were used to explain the need for stronger MLPs and the availability of technical assistance to these professional groups for when they encounter questions and challenges while helping underserved individuals and families.

During this time, LegalHealth also increased its advocacy of State legislation that would support the MLP model and enhance its sustainability. NYLAG LegalHealth worked with other advocates, including the UJA-Federation of New York, and helped draft legislation for State legislators' review. The Coalition had an opportunity to review and critique current legislation and provide input for new legislation. The technical assistance portion of the project focused heavily on information sharing—LegalHealth would provide expertise, guidance, and referrals when necessary, to these other professional groups across New York State. These technical assistance activities included:

- Responding to questions from groups seeking guidance and technical assistance.
- Providing consultation and backup support via email, phone, and in-person visits to help promote sustainability.
- Evaluating existing resources within established MLPs.
- Sharing best practices, how challenges were handled, and expertise on various cases.
- Sharing and adapting start-up tools to help better manage the paper trail, such as needs-assessments forms, intake forms, case tracking forms, core curriculum materials, and funding and sustainability strategies so that these groups could eventually carry out their own MLP needs independently.
- Learning how to adapt client survey forms and models of cost/benefit analysis.

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Technical assistance was provided to the following groups during the two-year project:

- American Lung Association of New York State
- Empire Justice Center
- New York State Thoracic Society
- Legal Services of Central New York, Inc.
- Legal Services of Hudson Valley-White Plains Medical Center
- Manhattan Legal Services William F. Ryan Center
- Nassau/Suffolk Cancer Legal Services Center
- New York Presbyterian Hospital
- New York University School of Law
- Kaleida Health Care System
- Legal Aid Society of Mid-New York
- Neighborhood Legal Services, Inc. Buffalo-Roswell Park
- Newborn Home Visiting Program-New York City Department of Health and Mental Hygiene
- Rochester General Pediatrics Association
- Stony Brook University School of Nursing



V. Challenges

One challenge to the project was the economic downturn of 2008–2009. “People had to regroup after the economy suffered,” said Retkin. She stated that the recession became a distraction and there was concern that future financial support would not be as readily available; however, the Coalition did continue to move forward, such as holding its statewide meeting in Syracuse in spring 2009.

The New York State Coalition of Medical-Legal Partnerships serves as a vehicle for information-sharing and one of the channels used for information-sharing is a listserv hosted by the Western New York Law Center. NYLAG LegalHealth reported that a second challenge to the project was that the listserv was

FUNDING INITIATIVE

The LegalHealth project received a 2007 Special Opportunities grant because the Foundation felt it represented an opportunity to take an initiative that has been effective in New York City and spread it to other communities throughout the State.

underused and that many interactions between Coalition members occurred offline. The listserv could assist with data collection and expediting information, however, Coalition members continued to send information directly to LegalHealth for distribution instead of sending information directly through the listserv and maximizing information distribution.

A third challenge had been the stalling of State legislation that would formally support the MLP model across New York State. NYLAG LegalHealth reported “enthusiastic feedback” about its legislation proposal from both sides of the political aisle. Because of the downturn in the economy during the 2009 legislative session, however, supporters of the proposal thought it best to wait and introduce legislation in 2010—especially since the intention of the legislation was to create a funded demonstration project housed in the New York State Department of Health. Both chairs of the State Assembly and Senate Health Committees introduced the legislation again in 2010 with hopes that it will pass.

VI. Key Findings

One outcome—that was not one of the original objectives—was the creation of the New York State Coalition of Medical-Legal Partnerships. The Coalition has grown from 12 members to 40 participants, including 17 legal organizations, seven health care facilities, four community groups, three law schools, and one health advocacy organization all currently registered on LegalHealth’s listserv. LegalHealth has provided technical assistance to these groups as a whole, as well as to groups individually, throughout the two-year project period.

In addition to information-sharing, the Coalition provided a vehicle for training. In December 2009, it hosted a webinar on the new Power of Attorney Statute, and hopes to plan webinars on other topics, including fighting denials of private insurance.

“The medical-legal partnership educates doctors about the legal issues affecting their patients and we work to make the physicians our partners in their patients’ care,” said Retkin. The Coalition, she explained, helped spur interest, which, in turn, helped strengthen partnerships between hospitals, physicians, and lawyers. Making these legal services available onsite also helped expedite the process, which saves money. “With medical-legal partnerships such as the ones formed in our Coalition, you have a direct relationship with the patient’s doctor, so for example, you can access medical records quickly because you have that connection onsite, at the hospital. You’re not waiting six months for medical records. Paperwork gets done far more quickly, so from an administrative point of view, it’s a team effort that is more cost-efficient and cost-effective.”

The Coalition meetings and statewide conference also led to interest on how to maximize pro bono resources, how to create a law school model so that training in MLPs can begin earlier on, and how to continue with raising awareness and attracting donors. NYLAG LegalHealth expressed an interest in

hosting a breakfast or a lunch with Philanthropy New York to explain the MLP model and to attract support.

Moreover, the New York State Bar Association's Health Law Committee formed a new committee called the Medical Legal Partnership Committee, which wrote a memo in support of the new bill.

How the grant affected patient/client referrals is not known. Referral data was not available at the time of outcome report submission.



VII. Lessons Learned

Retkin reported that, overall, she was pleased with the outcomes of the project and was pleased with the creation of the Coalition. She believes Coalition activities will continue and that there is a great deal of sustained interest. The recession and the stalling of State legislation postponed some of the Coalition's short-term goals, but these goals can still be achieved in the long term. "The real challenge now is the economy because our individual member programs across the State are struggling and having a hard time maintaining funding," said Retkin. Even so, "our model is so proven that these economic challenges are just a temporary blip. The model is a win-win for everybody. The patients benefit, the doctors benefit, and we have proven that legal interventions through MLPs can generate revenue for the hospitals".

VIII. The Future

Retkin said the MLP model has a great deal of potential under the new Federal health care reform legislation signed into law by President Barack Obama in spring 2010.

Under health care reform, she said, "more people will be insured, more people will be using hospitals, there will be a greater need just in sheer numbers. People will be bringing non-medical needs to the hospital so it will impact favorably on the medical-legal partnership model. We can bring in health care recovery dollars. For example, medical-legal partnerships can straighten out private insurance matter for a hospital so that the hospital is reimbursed and the patient isn't overwhelmed with medical bills or we can see who's eligible for Medicaid. It's a win for everyone."

The Coalition seeks to continue with its meetings. In recognition of the work of LegalHealth, the New York State Bar Association Committee on Legal Aid awarded LegalHealth the prestigious Denison Ray Award at its June 2010 conference.

BACKGROUND INFORMATION:

ABOUT THE GRANTEE

NYLAG serves immigrants, seniors, the homebound, families facing foreclosure, renters facing eviction, low-income consumers, those in need of government assistance, children in need of special education, domestic violence victims, persons with disabilities, patients with chronic illness or disease, low-wage workers, low-income members of the LGBT community, Holocaust survivors, and others in need of free legal services. Founded in 1990 on the premise that low-income individuals and their families can improve their lives significantly if given access to the justice system, NYLAG works to empower individuals, protect legal rights, and promote justice among vulnerable populations in New York.

LegalHealth is a division of NYLAG and partners with medical professionals to address the non-medical needs of low-income people with serious health problems. LegalHealth complements health care with legal care—providing free legal services in medical facilities and training health care professionals to understand the legal issues their patients face. LegalHealth extends its mission nationally by providing technical assistance to bring medical and legal partners together.

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