

# THE PROMISE OF MEDICAL-LEGAL PARTNERSHIPS

## LESSONS LEARNED FROM HPC INVESTMENT PROGRAMS

*“We believe that the roll out of this type of program that provided intensive person-centered medical, social, and legal care coordination was novel and much needed in this safety net environment. There are many case management programs within Boston variously addressing unmet needs in siloed domains, but none to our knowledge that combine care coordination across all three domains, with dedicated experts in each field partnering in a regularly structured way within one tight-knit team.”*

—BOSTON MEDICAL CENTER STAFF MEMBER

### BACKGROUND

The first medical-legal partnership was launched at Boston Medical Center (BMC) in 1993 with the goal of combining the skillsets of medical professionals and lawyers to treat and teach the social determinants of health.<sup>1</sup> Since that time, according to the [National Center for Medical-Legal Partnerships](#), more than 400 medical-legal partnerships have been established across the country, with twelve in Massachusetts alone. Medical-legal partnerships can serve a range of clinical and social objectives,<sup>2</sup> and their growth has been fueled at least in part by a shift towards value-based payment methods and an interest in improving outcomes and managing costs for populations with complex health and social needs.<sup>3</sup> Such was the case for the awardees that forged medical-legal partnerships as part of their overall approach to achieving the goals of two Massachusetts Health Policy Commission (HPC) investment programs – the [Targeted Cost Challenge Investments \(TCCI\) Program](#) and the [SHIFT-Care Challenge Investment Program](#).

### PURPOSE

The purpose of this brief is to highlight practical lessons from HPC investment program awardees that have implemented medical-legal partnerships for defined patient populations. These implementation insights were generated both from organizations like BMC with considerable experience with these types of partnerships as well as organizations that are newer to the work and are intended to complement a growing body of knowledge demonstrating the value of medical-legal partnerships. The brief includes awardees’ reflections on the benefits of medical-legal partnerships, sample use cases, and some of the partnership elements and processes that awardees found effective.

### MEDICAL-LEGAL PARTNERSHIPS: AN OVERVIEW

Medical-legal partnerships can help improve care by enlisting lawyers to collaborate with medical care teams and assist patients with certain health-related social needs that can benefit from legal interventions.<sup>4,5</sup> When unaddressed, patient’s social needs (e.g., education, housing, employment) can exacerbate medical and behavioral health conditions and make it challenging to adhere to treatment regimens, access preventative health care, and take care of their health needs.<sup>6,7</sup> Resolving these needs may require navigating complex bureaucratic systems and having a detailed understanding of legal and policy issues.<sup>5</sup> Therefore, building strong medical-legal partnerships can equip medical care teams with information and resources which enable them to holistically address patients’ needs.

The medical-legal partnerships that were implemented by HPC awardees demonstrated that these partnerships can include a variety of services. Lawyers may offer guidance to clinicians and staff on changes to laws and policies, patients’ rights in areas such as housing, immigration, and education, and patient eligibility for social services or other community resources. They can assist medical teams with obtaining identification documents or expunging prior conviction records for patients, and in some cases, may intervene in patients’ ongoing legal matters by providing letters or legal representation for patients in court. Within the partnership, the role of the health care organizations is to provide relevant clinical information to lawyers to inform their patient advocacy efforts. For example, a clinician may provide medical history documentation to support a request for disability accommodation in housing, allowing the legal team to write a formal letter on behalf of the patient advocating for accessible housing. The medical team members, such as social workers and community health workers, may then work with that patient to file the letter with their landlord and appropriate authorities.

### MEDICAL-LEGAL PARTNERSHIPS IN HPC INVESTMENT PROGRAMS



#### TCCI

**Boston Medical Center (BMC)** partnered with Medical Legal Partnership | Boston (MLPB)

#### SHIFT-CARE

**Community Care Cooperative (C3)** partnered with Health Law Advocates (HLA)

#### SHIFT-CARE

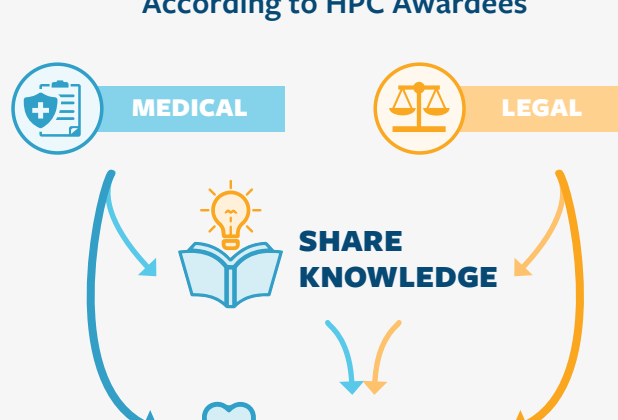
**Steward Health Care Network (SHCN)** partnered with Medical Legal Partnership | Boston (MLPB)

### THE BENEFITS OF MEDICAL-LEGAL PARTNERSHIPS

According to HPC Awardees

#### SHARE KNOWLEDGE

- Expand expertise for addressing patients’ health and social needs, especially those outside of health care’s traditional purview.
- Build medical literacy among the legal team and legal literacy among the medical team.



#### ENHANCE PATIENT CARE

- Connect patients to legal services to meet social needs that are negatively impacting their health.
- Address patients’ pressing legal needs and create tangible improvements in their day-to-day lives to enable them to focus on their and their families’ health and wellbeing.

### LESSONS LEARNED IN IMPLEMENTING MEDICAL-LEGAL PARTNERSHIPS

According to HPC Awardees

#### CASE CONFERENCING

Regular case conferences among clinicians and lawyers provided opportunities to discuss patients’ cases and identify opportunities for legal support.

“We have a strong partner, MLPB, who provides legal consultation for situations that arise, and are an integral part of our bi-weekly interdisciplinary case review meetings. This has allowed the team to **advocate and inform our members** of their legal rights and to escalate situations that go beyond the scope of a community health worker.”

—SHCN STAFF MEMBER

“[BMC staff] have my cellphone [number]. We are in **constant contact**, whether it’s by texting or calling or emailing. We are available to one another ... It is a collaborative coaching relationship; it’s consultative.”

—MLPB LAWYER

“Currently, we have the benefit of sharing office space with our partners in HLA, creating an environment where our teams frequently **interact and check-in** with one another.”

—C3 STAFF MEMBER

#### OPEN COMMUNICATION AND ACCESSIBILITY

Communication and accessibility among medical-legal partners enabled collaboration and real-time problem-solving

“In addition to the case review meeting, communication between partners happens via phone/email a few times during a [two]-week period ... This has provided an **open working relationship** and if there is a problem with any aspects that are causing barriers to care, Steward and our respective partners will communicate in real time.”

—SHCN STAFF MEMBER

#### BI-DIRECTIONAL LEARNING

Both clinicians and lawyers benefited from bi-directional learning.

“Very early on ... we would all say, “...[T]his person doesn’t have any legal needs.” And then [an MLPB lawyer], to her credit said, “I really feel like I should hear about [this case].” ... [T]here were definitely times [when] we did not recognize the service that she could provide [and] that there actually **was a legal need**. And she would step in and provide her guidance”

—BMC STAFF MEMBER

“We have seen an increased need for **utility interventions** during the winter season and have used our legal partnership when needed for consultation to **effectively manage** our members’ utility needs and inform our team’s practices.”

—C3 STAFF MEMBER

“As much as we want to have one data collection system, because of [MLPB’s] own privacy [policy] ...that was not something that we could do in real time. So figuring out how to **marry those two databases** has been something that we continue to always work through...[I]f I were to [do this] over again I think I would say that it should be the same database...and we would collectively agree upon the information that is going to be collected.”

—BMC STAFF MEMBERS

#### DATA SHARING POLICIES

Privacy policies covering both clinical data and legal information required thoughtful data sharing solutions.

“The challenge with [our usual] process is that we lose sight into the actions taken by the family since we do not have a release [to discuss the patient’s case with HLA] ... This barrier was discussed with C3 and HLA leadership and **adjustments were made** to workflow and communication pathways. Examples include community health workers and family contacting HLA together [so] the [community health worker] now has access to the HLA intake form and can **support** the family filling it out.”

—C3 STAFF MEMBER

### NEW OPPORTUNITIES FOR MEDICAL-LEGAL PARTNERSHIPS

The COVID-19 pandemic presented health care systems and their patients with unforeseen challenges and also cast a spotlight on longstanding health inequities.<sup>8</sup> Medical-legal partnerships are uniquely positioned to address unmet individual needs that have been exacerbating by the pandemic, such as assistance preventing evictions and utility shut-offs and accessing unemployment benefits, as well as underlying policies that pose systemic barriers to health and well-being.<sup>9,10</sup> Awardees offered examples of ways in which their medical-legal partnerships enabled them to assist their patients in a changing environment due to COVID-19, and to support the specific needs of patients who face longstanding systemic inequities and oppression.<sup>11,12</sup>

#### RESPONDING TO THE EFFECTS OF THE COVID-19 PANDEMIC

Medical-legal partnerships gave awardees access to timely information to provide patients and their families in response to constantly changing circumstances during the COVID-19 pandemic.

“HLA provided us with **timely, accurate, and accessible** information about all the changes going on in the education system [during the COVID-19 pandemic], particularly related to special education services. During a program committee meeting, HLA presented on the rights that children and families have in **continuing to access** [individualized education plan] services during COVID while their child is learning remotely.”

—C3 STAFF MEMBER

“We had two **transgender patients** who engaged with our program. Initially, the advocates needed support to **identify the appropriate resources**. Fortunately, through our connections at BMC and with [MLPB], ... we were able to acquire a cadre of information for clinics and support groups to **help these patients** move forward in their lives with **dignity and respect**.”

—BMC STAFF MEMBER

#### ADVANCING HEALTH EQUITY

Medical-legal partnerships enabled awardees to remove barriers to health and health care for patients who often face challenges due to social risk factors such as their race, ethnicity, gender identity, history of conviction or court records, and/or immigration status.

“We have been working with a few members [who] have had trouble finding a job or securing housing due to their **[history of] criminal [conviction]**. We have also run into situations where a **member’s immigration status** has impacted their ability to access services ... We have been utilizing our biweekly interdisciplinary case review meetings to receive feedback and direction from MLPB around some of the legal complexities we frequently are facing which pose barriers to accessing available community resources.”

—SHCN STAFF MEMBER

#### ABOUT THE HPC

The Massachusetts Health Policy Commission (HPC) is an independent state agency charged with monitoring health care spending growth in Massachusetts and providing data-driven policy recommendations regarding health care delivery and payment system reform. The HPC’s mission is to advance a more transparent, accountable, and equitable health care system through its independent policy leadership and innovative investment programs. The HPC’s goal is better health and better care – at a lower cost – for all residents across the Commonwealth.

[WWW.MASS.GOV/HPC](http://WWW.MASS.GOV/HPC)

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4 National Center for Medical-Legal Partnerships

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