2020-2021 State Budget Request:
Supporting Legal Partnerships for Child and Adult Health

BUDGET REQUEST

California Pan-Ethnic Health Network (CPEHN) and The Children’s Partnership (TCP) request that the California Department of Health Care Services (DHCS) be provided with a $30 million dollar budget allocation from the general fund for a grant program that supports partnerships between community providers and legal services organizations to support the wellbeing of children and adults. The purpose of the grants would be to increase access to legal services that address the underlying causes of health inequities in locations that are easily accessible to individuals and families, with a particular focus on immigrant communities.

BACKGROUND

Social determinants of health, such as economic security, housing stability, and immigration status have a profound impact on the health and wellbeing of children and adults. Recent actions of the federal administration have encouraged the spread of fear and misinformation, increasing the risk factors for poor health and wellbeing for millions of Californians. At the same time, community providers, including health, early childhood, and education providers, struggle to keep pace with the impact of anti-immigrant attacks, and frequently lack the training, information and tools needed to address the harmful impacts of the federal administration’s policies on the wellbeing of communities and access to necessary services. As a result of federal actions, immigrant communities avoid necessary services that address the social determinants of health for themselves and their children. Providers report that pregnant women are delaying prenatal care, children are missing routine appointments or absent from class, and many individuals are disenrolling from health and social services programs. Now more than ever, access to timely and accurate legal services is a critical intervention for addressing social determinants of health for California communities.

HOW LEGAL PARTNERSHIPS FOR CHILD AND ADULT HEALTH WORK

Evidence strongly suggests that structured partnerships between community providers and legal services can expand and accelerate access to the concrete supports and services immigrant communities need to improve health and wellbeing. Medical Legal Partnerships (MLP) are the most recognized model of legal partnering for health. The majority of MLPs include the placement of legal services on-site, training for community providers on identifying legal issues, training on public policy changes, referrals, and direct legal services for individuals and families. Structured partnerships between community providers and legal services can improve outcomes such as:

- **Address the Justice Gap:** Nearly 90% of low-income people receive inadequate or no professional help for the civil legal problems they face. MLPs help address this justice gap by providing civil legal information, advice, and representation to patients around a range of issues that impact health (e.g. housing; access to benefits, education, and employment, etc).

- **Improve Access to Preventive Care:** MLPs can assist with accessing health services, which is particularly critical in early childhood development. For example, participants in a Randomized Controlled Trial of the Project DULCE (Developmental Understanding and Legal Collaboration for Everyone) model found that new parents and infants experienced both improved preventive care and accelerated access to concrete support than the control group of families.

- **Improve Mental Health:** A nationwide analysis found that MLPs can improve mental health outcomes and reduce stress. The Los Angeles County Whole Person Care Project demonstrates how this might
work, piloting the integration of legal services for high-risk Medi-Cal patients with mental health and substance use issues with promising results and supporting over 2,000 technical assistance cases.

- **Support Provider Burnout**: MLPs allow providers to operate at the top of their license. Providers can focus on the delivery of quality patient care when usual time spent on addressing legal or administrative barriers is addressed by on-site legal services. A study in Georgia showed that having the resources of a legal expert on-site improves provider satisfaction.

- **Identify Policy Challenges**: MLPs can identify broader policy problems. For example, California MLPs identified infants denied deemed eligibility and advocated for systemic changes to DHCS. California MLPs have proven to increase and support child enrollment in Medi-Cal and instituted the necessary remedies to ensure every eligible child receives health services.

### ACTIVITIES

Incorporating an array of activities for the recognition of MLPs would engage both more advanced MLP practices while encouraging other MLP practices to get started. Starting/sustaining operations including:

- Development of a memorandum of understanding and a data sharing agreement
- Workforce training and Interprofessional Education (IPE) for staff on effective screening and identification of barriers related to individual and families’ legal rights and remedies
- Training and hiring of community health workers
- Identify and addressing policy gaps
- Groundwork to acclimate legal professionals to the organization’s structure and staffing
- Virtual activities for rural or hard to reach populations
- An evaluation framework that includes key outcomes in technical assistance, direct legal services, referrals, provider and consumer satisfaction, and examples of improved compliance.

Legal activities can include:

- Legal intake and on site direct legal services to children and adults (services can range from brief legal advice to full representation)
- Legal resources and information for staff to convey to families
- Consultations with staff about patient’s legal needs
- Training on social determinants, parity laws and other consumer protections for immigrant populations

### EVALUATION

The California Department of Health Care Services (DHCS) is tasked with the identification of statewide health outcomes associated with legal partnerships and potential value-based initiatives for vulnerable populations, including Medicaid managed care contracts.

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