



NFMLP Stakeholders, Supporters, Advisors, 1st Quarter (July, August, September)
2018-2019 Report
December 20, 2018

I. OPERATIONS

A. TRAININGS, EDUCATION, AWARENESS

Completed

September 6, 2018: Advanced Topics in Special Education Training, presented by Ann Siegel, Disability Rights Florida at UF Health's Pediatric Multi-Specialty Center

September 6th: Meet with Dr. Terrie Andrews regarding development of tool to screen for health harming civil legal aid needs, and more specifically, service needs for Medicaid enrollees with behavioral health concerns.

October 5, 2018: Meet with Dr. Mark Toney regarding (1) development of tool to screen for health harming civil legal aid needs, and (2) measuring the impact of an MLP intervention in reducing average length of hospital stay.

October 17, 2018: Pediatric Grand Rounds presentation on the Northeast Florida Medical Legal Partnership

November 14, 2018: Nemours Children's Hospital Grand Rounds presentation on the Medical Legal Partnership Model in Children's Hospitals

December 3, 2018: National Health Law Program, presented on Advocacy in Managed Care with Dr. Rita Nathawad, Medical Director of JaxHATS

December 17, 2018: Changes in Florida's Managed Medical Assistance Waiver, presented by NFMLP and Anne Swerlick, Senior Health Policy Analyst, Florida Policy Institute, Inc.

Upcoming

January 3, 2018: Attending and Providing Comment at Rule Hearing on Changes to Florida's Medicaid Eligibility Rules

January 29, 2018: Meeting of NFMLP Partnership to Develop and Implement Health Harming Civil Legal Aid Needs (HHCLAN) Screening Tool at WCH

February, 5, 2018: NFMLP Bi-Annual Meeting to Review Progress for 2018-19 MOU year

March 18, 2018: Employment Rights for Parents/Caretakers caring for Medically Complex Children, presented by Scott Fortune, Esq., Fortune Law Offices

B. CASE REFERRALS

Patients Referred: 64
Legal Issues of Patients: (69)

SSI/SSDI (16)
Family Law (10)
Guardianship (9)
POA/Healthcare Surrogate (3)
Medicaid/Med-Waiver/ACA (12)
Housing (3)
Immigration (5)
Employment (1)
Education (4)
Consumer (2)
Civil and Disability Rights (3)
Other Health Benefits (1)

II. OUTCOMES

Cases Referred to Pro Bono (6): placed (6); awaiting placement (0)
Referred to JALA Attorney (6)
Brief Services/Advice & Counsel from NFMLP (20)
Full Representation by NFMLP (9)
Did not return call/email to schedule intake (4)
No Show/ Phone number doesn't connect (9)
Referred to other legal/social services agencies (4)
Awaiting Callback (8)

III. INDIVIDUAL CASE STORIES

A. A JaxHATS patient referred to the NFMLP for assistance was recently approved for Social Security Disability Insurance ("SSDI") benefits. The patient is diagnosed with sickle cell anemia and is often in and out of the hospital with pain crises. The patient was denied on her initial application for benefits, but after the patient and her mother contacted the NFMLP for assistance, the NFMLP was able to argue why the patient met the disability criteria and should be found eligible. Since the benefits were granted at the reconsideration level, the patient did not have to wait a year or more to argue her disability at the hearing level.

After the patient was approved for SSDI, the NFMLP assisted the patient in applying for MEDS-AD, a category of Medicaid that allows individuals who are below 88% of the Federal Poverty Limit to receive state plan Medicaid services. The income limit for MEDS-AD is slightly higher than the limit for SSI-Related Medicaid allowing some SSDI recipients to access Medicaid while awaiting their Medicare eligibility or to supplement their Medicare coverage. DCF denied the initial MEDS-AD application, but the NFMLP filed an appeal on the patient's behalf and the Medicaid application was re-processed and approved.

In addition, the NFMLP is assisting the patient with a waiver of overpayment for Supplemental Security Income benefits she previously received.

- B. An infant Medicaid enrollee, M.C., was admitted to Wolfson Children's Hospital during the loss of his Medicaid eligibility. The NFMLP filed an expedited appeal on the basis that a gap in coverage would impact the child's health and well-being. The NFMLP was able to have the infant's coverage reinstated prior to discharge from WCH. This allowed the child to pay for medications required upon discharge at the hospital pharmacy.
- C. The NFMLP assisted S.R. with a complex overpayment matter. S.R. originally received notice that her son, W.R., was overpaid in the amount of \$9,775.00 on the basis that W.R. owned settlement funds from a personal injury matter which was being held in a conservatorship. S.R. followed the instructions of the Social Security Administration (SSA) to move the funds into a special needs trust. S.R. provided the finalized trust to the SSA, but the SSA did not reinstate W.R.'s benefits and continued to insist that S.R. owed the almost 10k overpayment.

The NFMLP accepted S.R.'s matter for representation. The NFMLP filed a request for reconsideration regarding W.R.'s cessation of benefits arguing reinstatement of benefits without a new application because of S.R.'s compliance with SSA's instruction to establish a trust. The NFMLP also filed a request for waiver of overpayment.

After multiple months of advocacy and a second request for reconsideration, the NFMLP was able to:

- (1) Secure SSA's approval of the trust as an excluded resource to W.R.
- (2) Secure waiver of overpayment of the full amount of \$9,775.00
- (3) Secure back payment in the amount of \$2500 for W.R.
- (4) Secure reinstatement of benefits from December 2018 and onward

The additional funds will allow S.R. to continue to care for her medically fragile son.

- D. C.S. was referred by The Player's Center for Child Health when the Medicaid of his medically fragile son, A.S., lapsed. The Player's Center was able to re-establish A.S.'s Medicaid by assisting the family with a recertification application. However, due to the lapse, A.S.'s plan (unlawfully) disenrolled him and A.S., after recertification, was switched into Fee For Service Medicaid. A.S.'s nursing agency told C.S. he must immediately opt back into his managed care plan or they would have to terminate services. C.S. re-enrolled in A.S.'s original health plan, but was told the change would not take effect for two months putting A.S.'s home health services into risk. The Player's Center referred the matter to the NFMLP for assistance. The NFMLP filed a grievance with the health plan, a complaint with the Agency for Healthcare Administration (AHCA), and contacted general counsel directly about the issue. Within the matter of a few days, the health plan agreed to AHCA's request for retroactive enrollment on the plan. A.S. was placed back on his original health plan immediately and home health services continued without interruption.
- E. The NFMLP was referred two adoption matters in the first quarter of the MOU 2018-19 year. Jacksonville Area Legal Aid's pro bono unit was able to place both adoptions within only a few weeks of referral.

D.H. was referred by WCH for assistance with petitioning for relative adoption over her 15 year old granddaughter who is medically fragile. D.H. has had temporary relative custody of her granddaughter since 2003 and both parents agreed to the adoption. The relative adoption will allow the granddaughter to draw on D.H.'s retirement benefits raising the small amount of income on which they both currently live.

T.A. was referred by a UF Health pediatrician for assistance with petitioning for adoption. T.A. has cared for her grandchildren for over 10 years. One grandchild is diagnosed with significant mental health issues. The goal of the adoption is to allow the grandchild with the disability to draw on the benefits of her grandparents to increase the family's modest income.

- F. The Player's Center for Child Health referred a matter regarding DCF's refusal to count a family's health insurance premiums towards establishing their Medically Needy share of cost. The mother, M.C., gave birth to twins, one of which suffered from complications and spent time after his birth in the hospital. The NFMLP filed an appeal on M.C.'s behalf and argued that DCF incorrectly calculated whether M.C.'s family met their share of cost. The NFMLP was able to have DCF reopen the date of Medicaid eligibility to cover all of their outstanding hospital bills for their son. M.C. was grateful for the assistance in alleviating her medical debt.
- G. The NFMLP provides ongoing educational advocacy to J.G. who is a cognitively intact kindergartner but who is also medically fragile. Over the summer, J.G. decided he wanted to attend his neighborhood school but was told the school did not have accessible bathroom facilities and, therefore, they were unable to accommodate his needs and he could not transfer schools. The NFMLP attended J.G.'s IEP meeting and argued the school's obligation to enroll J.G. in his neighborhood school. The school agreed to and established some short term accommodations regarding J.G.'s toileting needs. The NFMLP continues to represent J.G. to ensure that the school ultimately meets its obligation to supply J.G. with a bathroom facility that best meets his needs. Another IEP meeting with J.G.'s school is scheduled for January 7, 2018.
- H. A.W. was referred by the Bower Lyman Center because his SSI benefits ceased due to an improvement in his medical condition. A.W. is medically complex toddler diagnosed with a dysplastic malformed kidney and developmental delay. The NFMLP accepted the matter for representation and filed request for reconsideration within 10 days of the cessation notice so benefits would continue pending outcome of the appeal. The NFMLP provided argument as to why A.W. continued to meet the child disability listing and should not be ceased. The SSA ultimately found that upon reconsideration, A.W. was disabled and entitled to benefits. The NFMLP was able to resolve the matter favorably and help the family avoid the long wait for an SSA hearing.
- I. A.L. is a single mother of two minor children, one of whom has severe physical disabilities. The family resides on the second floor in their apartment complex and the only way to and from their apartment is the stairs. As therapy for the child's disabilities, and to encourage the child to get exercise, the child's doctor prescribed her a special needs bicycle. This bicycle is incredibly heavy and the mother could not carry it up and down the stairs to and from the apartment regularly. They had attempted to store it on the first floor in the stairwell but management had threatened eviction if they continued to store it there. The case was referred to the Fair Housing Unit by the North Florida Medical Legal Partnership. The Fair Housing Unit intervened and requested, as a reasonable accommodation of the minor daughter's disabilities, that the family be permitted to store the bicycle under the stairwell downstairs. This reasonable accommodation was granted. As a result of the intervention of the Fair Housing Unit, the family remains stably housed and the bicycle has been moved downstairs and now the minor daughter is able to regularly use it
- J. Nemours Children's Specialty Care contacted the NFMLP attorney about a very special family of siblings, ages 12-20, who lost both of their parents and had no court appointed guardian. The 17 year old sibling had experienced a leg injury which required surgery. Unfortunately, under current Florida law, the older, 20 year old brother, M.C., could not consent to the surgery nor could the 17

year old. The only way in which Nemours could provide the surgery was if a court order custody or guardianship ordered were entered for the 17 year old.

JALA’s pro bono unit was able to secure both a probate and family law attorney for the family. The family law attorney helped the oldest brother establish temporary relative custody over the 17 year old and the younger sister. The 17 year old’s surgery occurred in August and he is healing while finishing his last year of high school.

The NFMLP also continued its assistance in M.C. applying and receiving survivor benefits on behalf of his two younger sibling. The SSA gave M.C. incorrect information on two separate occasions, so the NFMLP walked M.C. how to make an appropriate application and, in October, attended his SSA interview with him. During the SSA meeting, the SSA tried to use a September date (the first time the SSA acknowledge M.C.’s application for survivor benefits) to determine retroactive benefits. The NFMLP raised the issue that the protective filing date should extend further back given M.C.’s multiple failed attempts to file an application. The SSA agreed and extended the protective filing date to April 2018 ultimately resulting in an award of over \$20,000 for both children as well as survivor benefits moving forward.

IV. SYSTEMIC WORK

Florida Rules on “Good Cause” for Enrollment/Disenrollment

The NFMLP drafted rule comment regarding proposed changes to Rule 59G-8.600 of the Florida Administrative Code regarding Disenrollment from Managed Care Plans. The NFMLP highlighted the problem of requiring exhaustion of the request to disenroll through the plan when there was an immediate need for a plan change due to the enrollee’s health concerns. This was made apparent in several cases that the NFMLP handled including C.S.’s case described above. AHCA addressed the NFMLP’s concerns in their final rule allowing for an exception to the exhaustion requirement where “immediate risk of permanent damage to the enrollee’s health is alleged.”

V. NFMLP REFERRAL DATA

Pediatric Focus of NFMLP (During January – June, 2017, NFMLP transitioned processes to onsite services and pediatric focus; 81 patient referrals and placements were also completed.)

Fiscal Year	1 st Quarter (July-Sept)	2 nd Quarter (Oct-Dec)	3 rd Quarter (Jan-Mar)	4 th Quarter (April-June)	Annual Total	% Increase over 2009 level of service (60 referrals per year)
2017-18	49	61	91	84	285	375%
2018-19	64					

Referral Data of NFMLP Prior to Pediatric Focus:

[In the beginning years of NFMLP (2009 and before) approximately 60 patients were referred annually. In the 2010 and 2011, the NFMLP received partial funding from the Florida Bar Foundation to increase patient referrals and legal services to patients through the involvement of pro bono attorneys. In 2010, NFMLP received 135 referrals. In 2011, NFMLP received 212 referrals. In 2012 and later, no dedicated funding was available for

NFMLP but the level of patient service has remained high and new medical providers are encouraged to use this **valuable resource in patient care.**]

Calendar Year	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter	Annual Total	% Increase over 2009 level of service (with no dedicated funding for NFMLP)
2012	43	56	55	34	188	213%
2013	39	41	51	67	198	230%
2014	69	49	36	43	197	228%
2015	64	70	70	73	276	360%
2016	88	69	93	82	332	453%