Welcome from the Director
Emily A. Benfer, Clinical Professor of Law

This issue highlights the interdisciplinary nature of the Health Justice Project and the important work of our law, medical and social work students in response to the urgent health needs in our community. The following client stories and the contents of this newsletter demonstrate that extraordinary outcomes are possible when the fields of law, social work and medicine work together.

A few months ago, Teresa was immobilized by severe hip pain. At the same time, she received a five-day notice of eviction from her landlord. One of our medical champions was eager to perform hip replacement surgery but could not because Teresa would have no place to convalesce after the surgery. Our Student Attorney immediately began negotiating with the landlord. Not only was the eviction withdrawn, the patient was allowed to stay in the apartment for a number of months to allow for recovery. Thanks to our social work students, Teresa found more suitable housing for the family. Today, Teresa is mobile, experiencing significantly less pain and is able to care for her daughter.

John was thirty-one when he was referred to the Health Justice Project after his application for Social Security Disability Income (SSDI) was denied. At the age of 18, John learned that he had a rare degenerative disorder of the cornea that would cause him to become blind by the time he turned thirty. Yet, every SSDI application he filed was denied because he could not afford an eye exam to prove his blindness. Through the advocacy of a law student and medical resident, Erie Family Health Center arranged for a free eye exam. The 20 minute exam, which would not have been possible without the medical-legal partnership, proved John was blind and resulted in a rare ruling from the bench awarding full benefits and back benefits. The social work team assisted John in obtaining additional benefits that would help him cope with his disability and manage his bipolar disorder.

Thank you for your continued support of the Health Justice Project and for knowing what it means when our medical champions say, “Take two law students and call me in the morning!”

“I learned more from HJP than any other law school class. It applies everywhere, no matter what area of law.”

– Giorie Mahn, Law Class of 2014

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This spring, the Health Justice Project assisted over 130 patients and achieved multiple victories, including:

- **Cynthia Herrera, 2013 Law**, argued an Emergency Motion to Intervene on behalf of a group of tenants in an 18 unit apartment building being shut down in building court. Even though the building had dangerous conditions, Cynthia argued that tenants should be given more than 4-days’ notice before having to move, and that the tenants should receive relocation assistance. Cynthia's advocacy resulted in an Agreed Order that each family would receive $1,200.00 in moving assistance and that tenants were given an additional 2 weeks to obtain replacement housing. Cynthia's advocacy prevented at least 10 families from becoming homeless.

- **Rachelle Sico, 2014 Law**, appealed the Social Security Administration’s decision to deny a client disability benefits. In a hearing presided over by an Administrative Law Judge, Rachelle argued that the Social Security Administration’s decision was incorrect because the client’s physical impairments constituted a disability. As a result of Rachelle’s intervention, the client was able to access his rights and was not forced to choose between paying for food and sophisticated legal representation.

- **Maggie O’Donoghue, 2013 Law**, defended a client in Cook County eviction court in an action initiated under the Illinois Forcible Entry and Detainer Act. Maggie argued that the client’s due process rights were violated by the landlord’s failure to give proper notice of termination. Maggie’s advocacy resulted in an Agreed Order worth $3,500 for her client and afforded the client several weeks to remain in his unit while he searches for new housing. Maggie’s representation also prevented the client from experiencing homelessness.

- **Emily Coffey, 2014 Law**, advocated on behalf of a tenant with substandard housing conditions. The tenant was referred to the Health Justice Project after her doctors discovered that severe rat, mice, and roach infestations were aggravating the health of her young children. Emily wrote a letter to the landlord stating that if he did not make necessary repairs to the property, the tenant would terminate the lease, thereby asserting the tenant’s rights under the Chicago Residential Landlord and Tenant Ordinance. Emily’s advocacy safeguarded the health of the tenant and her children by allowing them to access safe and habitable housing.

- **Giorie Mahn, 2014 Law**, advocated on behalf of a client denied disability benefits by the Social Security Administration. Due to his health impairments, the client was unable to complete the complex appeal. Giorie helped the client navigate the Social Security appeals process. As a result of Giorie’s advocacy, the client successfully submitted appeals materials before the statute of limitations expired. Giorie’s intervention affords the client another opportunity to obtain benefits necessary to manage his health impairments.

- **Cassie Harris, 2014 Law**, advocated on behalf of a client whose family had been living without access to running water for a decade. In investigating the client’s case, Cassie discovered that the water was disconnected, in part, due to bills accumulated by the client’s now-deceased father and that the utility had never been put in the client’s name. Cassie helped the client understand his rights as well as provided him with information about utility assistance programs. As a result of Cassie’s advocacy, the client is in the process of reconnecting his water.

- **Tyler Hanson, 2014 Law**, advocated on behalf of a client at risk of utility discontinuance. As a diabetic, the client relied on electricity to refrigerate insulin, which is critical to controlling her medical condition. Tyler worked with the client’s doctor to exercise the client’s rights under the Illinois Administrative Code, successfully asserting that discontinuance of service was unlawful because it would aggravate the client’s diabetes. As a result of Tyler’s advocacy, the client’s utilities remained connected, enabling her to manage her health condition.

- **Jessica Sanchez, 2013 Law**, represented a client in an appeal of the Social Security Administration’s decision to deny a client disability benefits. In a hearing presided over by an Administrative Law Judge, Jessica argued that the Social Security Administration’s decision was incorrect because the client’s physical health impairments constituted a disability. In a ruling from the bench, the judge decided in favor of Jessica and the client was awarded benefits to July 2012. The client will receive thousands of dollars in back-payments as well as monthly disability benefits going forward. Jessica’s representation prevents the client from facing food insecurity, housing instability and provides the client with resources to obtain much needed medication.

- **Benjamin VanGelder, 2014 Law**, advocated on behalf of a client referred to the Health Justice Project for assistance with a severe bedbug infestation. Ben researched the tenant’s rights under state and local law to determine a strategy to enable the tenant to escape the infestation. As a result of Ben’s advocacy, the tenant was informed of her rights and able to choose the best strategy for her family.
At the end of the Spring 2013 Semester, students enrolled in the Health Justice Project were asked to reflect upon their experiences. These are lessons they will apply throughout their legal careers.

- I’ve learned that even if you can conceptualize something, you don’t know what that means until you do it. Visiting a client at home was a very powerful experience. You cannot have judgments or assumptions about clients. You just have to go the extra mile.

- I learned in HJP that no task is too small. Even the little things mean a lot to our development or can help someone.

- HJP taught me how to be an advocate for someone and the level of meticulous, detailed, consistent work being an advocate requires.

- When you work with a client, you’re more than a lawyer, you’re a confidant, a counselor.

- It is great to work with so many dedicated people, to watch everyone and learn from everyone.

- There are a lot of difficulties in law but creating a bond with someone who needs your help makes it all worth it.

- The biggest takeaway from the HJP is the importance of self-reflection. That’s the only way to ensure that you’re constantly improving as an attorney, and the reflective skills that HJP has taught me will stay with me forever.

- Being in HJP means you get to enjoy real work. Staying positive and planning ahead will get you through anything.

- It’s valuable to keep plugging away and to be diligent; it’s important to accomplish all the little pieces.

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**Health Justice by the Numbers**

| $261,800 | Total amount of pro-bono legal fees donated by Health Justice Project law students in the Spring 2013 semester. |
| 27       | Law students, social work students, and volunteers participated in the Health Justice Project during the Spring 2013 Semester. |
| 95       | Medical providers trained by Health Justice Project in Spring 2013 on the social determinants of health. |
| $5,094   | Forgiveness of medical expenses advocated for clients by the Health Justice Project in the Spring 2013 semester. |
| 100%     | Percentage of favorable Social Security Disability decision for Health Justice Project clients during 2012 – 2013 academic year. |
| $28,600  | Reduced housing expenses achieved by the Health Justice Project in the Spring 2013 semester. |
David Buchanan: A Primary Care Physician Driven By Patient Care

Most undergraduate students majoring in economics do not go on to medical school, which is exactly what Dr. David Buchanan, Chief Clinical Officer, Erie Family Health Center, chose to pursue after college. Dr. Buchanan began volunteering on issues related to poverty, food insecurity and housing while completing his undergraduate studies and found economics to be a way to look at social justice issues through a quantitative lens. Dr. Buchanan believes that analyzing social issues through economics can provide useful insights and potential solutions to extremely challenging issues regarding social determinants of health. By the end of college—although Dr. Buchanan excelled in math—he realized that a job in economics would mainly consist of number crunching, so he decided to go to medical school; which would allow him to make a profound difference in people’s lives. According to Dr. Buchanan, he found the “prospect of medicine to be gratifying on a daily basis.”

Dr. Buchanan knew he wanted to be a primary care physician from the start and during his residency in primary care internal medicine at the University of California, San Francisco he was able to hone his patient care skills by delivering medical care first out of a mobile van and then on a bicycle in Golden Gate Park. These experiences taught Dr. Buchanan about the need to form partnerships and provided true insight into the importance of housing—two areas in which he continues to work today.

Dr. Buchanan has served as a medical director for two homeless shelters and was the Section Head for Social Medicine at John H. Stroger, Jr., Hospital of Cook County before coming to Erie. Additionally, he has never abandoned his passion for research and economics. Much of Dr. Buchanan’s research focuses on the health and economic impacts of housing homeless individuals. According to Dr. Buchanan, “medical care should always follow the best evidence and there was essentially no evidence about how housing impacts health, so I set out to fill a niche and provide attention to housing as the health issue.” As a result, Dr. Buchanan co-authored the first randomized trial to demonstrate how ready access to permanent supportive housing improves health outcomes and reduces health care costs.

Since arriving at Erie, Dr. Buchanan has been on a mission to improve quality in the primary care setting. Dr. Buchanan’s work has focused on goal setting for clinical teams, using electronic health record system (EHRS) data to drive patient outreach efforts, implementing clinical decision support in the EHRS, as well as expanding health promotion and care coordination. He has also supported Erie’s recruitment of top quality providers by developing academic, teaching and leadership opportunities for clinical staff. As a result, Erie has emerged as a national leader in quality of care.

Dr. Buchanan is a true believer in partnerships to provide high quality medical care. With Dr. Buchanan’s leadership and focus on a holistic approach to patient health, Erie has cultivated partnerships, like the Health Justice Project, to engage professionals outside of the medical arena to help address the needs of Erie patients. Dr. Buchanan understands that at the heart of primary care is providing for the health of the person and sometimes connecting that person with an attorney who can help secure a disability award can go a lot further than prescribing a pill. Addressing each patient and all their needs is a lofty goal, but Dr. Buchanan is certainly making laudable strides in that direction.

“The idea of making legal assistance available to Erie patients started out as just an idea and now the Health Justice Project is doing incredible work for our patients each semester. I am extremely grateful. Sometimes I have to pinch myself to make sure I am not living in a dream.”
-Dr. David Buchanan
Information for Health Providers

CountyCare Increases Access to Health for Cook County Residents

Rachelle Sico, 2014 Law

Access to care is an issue that affects Cook County’s estimated 250,000 uninsured patients. These patients are at a high risk for increased health concerns and are prone to health disparities that could be mitigated through preventative and primary care services.

To alleviate the disparities encountered every day by uninsured patients, Cook County adopted CountyCare on January 1, 2013. CountyCare is an early implementation of the Medicaid Expansion under the Affordable Care Act for select patients and providers. This program, available only until December 31, 2013, provides insurance to formerly uninsured adults, regardless of disability status, who reside in Cook County and meet certain income and citizenship requirements. The United States Department of Health and Human Services estimates that at least 115,000 to as many as 250,000 residents may be eligible for CountyCare in Cook County.

To be eligible for CountyCare, an individual must meet the following requirements: (1) be a Cook County resident, (2) be between the ages of 19-64, (3) be a US Citizen or legal immigrant for at least 5 years, (4) have an income below the program limits ($14,856 annually—individual, $20,123 annually—couple), (5) have a Social Security Number or pending application, and (6) not be eligible for Medicare or a traditional State Plan/Medicaid. Individuals can apply by calling and speaking to a CountyCare representative, or in person at different hospitals across Cook County.

After the patient’s application is processed, the patient is asked to select a Patient Centered Medical Home (“PCMH”) and primary care provider from a list of participating providers. A PCMH is a system of comprehensive and coordinated care that ensures that a patient obtains their maximum health outcomes. The PCMH system is fundamentally different than other insurance programs because a medical provider focuses on coordinating health services to improve the patient’s overall care.

Erie Family Health Center, a Health Justice Project medical partner, is currently accepting CountyCare enrolled patients. CountyCare patients will have a medical home at Erie committed to coordinating and providing continuous care. Patients will be able to access a range of different services including: inpatient, emergency and ambulatory services, case management, prescription drugs and mental health services, to name a few.

CountyCare is planned to transition seamlessly to Medicaid services, without any interruption in coverage for patients enrolled through CountyCare. The Illinois Department of Human Services is currently developing programming through which eligible patients in need of continuous health care services are able to access that care, as stipulated under the Medicaid Expansion plans within the Affordable Care Act. CountyCare provides a necessary first step to address the barriers of accessing health care and directly affects the health disparities that exist for eligible Cook County residents.

Pilot Project in Eviction Court

The presiding judge of the First Municipal District of the Circuit Court of Cook County implemented a pilot program to expedite eviction cases. Under the pilot program, tenants facing eviction will have less time to gather evidence to fight an eviction. Please refer any patient you identify as at-risk of eviction to HJP for legal assistance through the internal referral system.

Prevent Utility Shutoff

Many patients may have difficulty paying energy bills, like air conditioning, during the summer months. The Low Income Home Energy Assistance Program provides assistance to households unable to afford utility expenses. If a low-income household includes a person with a serious illness or a newborn, the family may be protected from utility shut-off for up to 60-days. Please refer your patient to HJP through the internal referral system if you identify a patient at risk of utility shut off.
Announcements

Emily Benfer highlighted the benefit of Medical-Legal partnerships at the Southern Illinois University Health Policy Institute. Emily presented on medical-legal partnerships in a graduate setting and highlighted the work of the Health Justice Project.

Congratulations to Health Justice Project Fellowship Recipients: Graham Bowman, Beth Karpiak, Jessica Sanchez, and Rachelle Sico! Graham, 2013 Law, and Beth, 13L, received Equal Justice Works Fellowships. Graham will work at the Chicago Coalition for the Homeless to provide legal services to help homeless youth enroll in Medicaid under the ACA expansion. Beth will work at Equip for Equality to advocate on behalf of individuals with traumatic brain injuries. Jessica, 2013 Law, received a Fulbright Fellowship to study how the Mexican judicial system safeguards human rights.

Emily Benfer, 2014 Law, is the recipient of the Schweitzer Fellowship to provide resources for cook county residents to enroll in CountyCare.

Emily Benfer published an article, Adaptive Clinical Teaching, in the spring 2013 edition of Clinical Law Review. The article discusses an innovative approach to clinical teaching pedagogy.

Emily Benfer and Allyson Gold presented on professional self-care at the 2013 Norman Amaker Midwest Public Interest and Social Justice Retreat.

Allyson Gold was appointed by the American Bar Association to serve as an Associate Editor of The Young Lawyer.

Thank you to our adjunct professors, Colleen Boraca and Mark Swartz, for another fantastic semester!

Thank You to the Spring 2013 Students!

Emily Coffey
Katie Golem
Tyler Hanson
Kyle Hardy
Cassie Harris
Cynthia Herrera

Mary Kennelly
Chessany Kyle
Giorie Mahn
Candace Moore
Prya Murad
Maragaret O'Donoghue

Adrienne Saltz
Jessica Sanchez
Shana Scott
Jon Sheffield
Erin Sutton
Benjamin VanGelderen

It’s hard to put into words what the Health Justice Project did for me, things that I could not do for myself. I wish I could give this gift to other people who really need it. The Health Justice Project helps people in need. People in the Health Justice Project are very special.

- Health Justice Project Patient/Client