(Original Signature of Member)
117TH CONGRESS 1ST SESSION H. R.
To amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize a State veterans assistance program, and for other purposes.
IN THE HOUSE OF REPRESENTATIVES
Ms. Scanlon introduced the following bill; which was referred to the Committee on
A BILL
To amend the Omnibus Crime Control and Safe Streets Act of 1968 to authorize a State veterans assistance program, and for other purposes.
1 Be it enacted by the Senate and House of Representa
2 tives of the United States of America in Congress assembled
3 SECTION 1. SHORT TITLE.

This Act may be cited as the "Veterans Medical

Legal Partnerships Act of 2021".

Congress makes the following findings:

SEC. 2. FINDINGS.

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1	(1) Medical-Legal Partnerships (hereinafter re-
2	ferred to as MLPs) are holistic care models that in-
3	tegrate legal expertise and services into health care
4	settings or delivery systems to address underpinning
5	social and legal needs that negatively affect the
6	health outcomes of veterans and their families.
7	(2) MLPs build upon the traditional legal clinic
8	model by leveraging the unique, historical collabora-
9	tions between legal services organizations and med-
10	ical providers.
11	(3) Among other things, MLPs screen for, and
12	then aim to resolve legal issues veterans present,
13	that may include income security issues, unsafe
14	housing, impending evictions, family law matters,
15	benefit concerns, elder abuse, and guardianship
16	issues. Especially during the COVID-19 Pandemic,
17	these needs were also shown to have direct implica-
18	tion on population health and the stability of our
19	economy.
20	(4) In addition to providing direct legal serv-
21	ices, MLPs help to improve quality and increase
22	value in health care delivery systems by engaging in
23	activities such as trainings for clinical teams and

helping health care providers optimize their services.

- 1 (5) MLPs have experienced steady growth and 2 reach since they were first developed in the mid-3 1990s. In 2020 alone, some 450 MLPs in 49 States 4 helped more than 75,000 individuals resolve health-5 harming legal needs. In recent years, MLPs have 6 flourished as effective models of care for veterans.
 - (6) Veterans are disproportionately at higher risk for health problems, many of which are exacerbated by unmet social and legal needs. The percentage of veterans who have at least one disability is double that of non-veterans, and 41 percent of veterans have mental health conditions such as depression, traumatic brain injury, post-traumatic stress disorder (PTSD), and substance use disorder.
 - (7) Veterans are also at higher risk of having legal issues, with one recent study finding an average of 1.5 legal issues per veteran. The most common civil legal needs included lack of access to VA benefits, custodial issues, and housing issues like eviction. Unmet legal needs are particularly harmful to the more than 1.7 million veterans with family incomes below 125 percent of Federal poverty level. In fact, a 2017 analysis found that civil legal problems related to veterans' issues affected 13 percent of low-income households with veterans or other mili-

1	tary personnel. For these households, the most com-
2	mon legal problems were in the areas of health or
3	health care, consumer finance issues, and employ-
4	ment.
5	(8) MLPs have proven to be a successful model
6	of addressing issues related to veteran care. One
7	study found that Veterans who received treatment at
8	MLPs showed significant mental health improve-
9	ment and even improvements in their housing and
10	income. Additionally, MLPs have been found to de-
11	crease readmission rates, length of inpatient hospital
12	stays, and visits to the emergency room.
13	(9) In Indiana, a 2018 grant from Indiana De-
14	partment of Veterans Affairs made possible an MLP
15	between Veteran Health Indiana and Indiana Legal
16	Services, Inc. and enabled veterans to access critical
17	civil legal services they may not otherwise have re-
18	ceived.
19	(10) A study assessed 4 MLPs in Connecticut
20	and New York and found that 75 percent of vet-
21	erans reached their legal goal in the one-year study
22	period, and in the first three months, those who re-
23	ceived full legal representation showed significant re-

ductions in symptoms of hostility, paranoia, psy-

1	chosis, generalized anxiety disorder, and
2	posttraumatic stress disorder.
3	(11) In 2017, a study designed to evaluate an
4	MLP at UMass Memorial Hospital found that pa-
5	tients referred by healthcare workers to Legal Aid
6	commonly had other legal problems which the attor-
7	neys could also help them address and 86 percent of
8	clients said they would use the program again.
9	(12) Currently, the overwhelming majority of
10	MLPs operate in Federal veteran's facilities. States
11	operate hundreds of veteran's homes, treatment fa-
12	cilities, and support programs that do not have
13	MLPs or access to civil legal providers.
14	SEC. 3. STATE VETERANS PILOT GRANT PROGRAM.
15	Subpart 2 of part E of the Omnibus Crime Control
16	and Safe Streets Act of 1968 (34 U.S.C. 10171) is amend-
17	ed by inserting before chapter B the following new chap-
18	ter:
19	"CHAPTER A—STATE VETERANS JUSTICE
20	ASSISTANCE PROGRAM
21	"SEC. 511. SHORT TITLE.
22	"This chapter may be cited as the 'State Veterans
23	Rehabilitation Program Act of 2021' or the 'SVets Act
24	of 2021'.

1	"SEC. 512. STATE VETERANS JUSTICE ASSISTANCE PRO-
2	GRAM.
3	"(a) Establishment.—The Attorney General shall
4	make grants to eligible entities that have established or
5	have plans to create medical legal partnerships that aim
6	to reduce recidivism, promote rehabilitation and prevent
7	victimization or partner with a State and unit of local gov-
8	ernment veteran facilities, including nursing homes, as-
9	sisted living facilities, long-term care facilities, healthcare
10	facilities, and mental health clinics. The partnership shall
11	focus on veterans whose medical needs put them at risk
12	of recidivism or reoffending or becoming victim to a crime.
13	"(b) Prioritization.—The partnership shall
14	prioritize veterans who, because of an associated health
15	concern, are—
16	"(1) facing homelessness;
17	"(2) unemployment; or
18	"(3) or at risk of fraud, abuse, or other victim-
19	ization.
20	"(c) Grant Period.—A grant awarded under this
21	chapter shall be for a period of not more than 5 years.
22	"(d) Eligible Entity.—An entity is eligible for a
23	grant under this chapter if the entity is—
24	"(1) a unit of local government in partnership
25	with a nonprofit organization; or

1	"(2) a State in partnership with a nonprofit or-
2	ganization;
3	that operates or demonstrates a plan to operate a medical
4	legal partnership.
5	"(e) Application.—To receive a grant under this
6	chapter, an eligible entity shall submit an application to
7	the Attorney General at such time, in such manner, and
8	containing such information as the Attorney General may
9	require, including a detailed description of the need for
10	the grant and an account of the number of individuals the
11	eligible entity expects to benefit from the grant.
12	"(f) Administrative Costs.—Not more than 5 per-
13	cent of a grant awarded under this chapter may be used
14	for costs incurred by the eligible entity to pay for adminis-
15	trative costs.
16	"(g) Construction Costs.—Notwithstanding any
17	other provision of this Act, no funds provided under this
18	chapter may be used, directly or indirectly, for construc-
19	tion projects, other than new construction to accommodate
20	a medical legal partnership and may not constitute more
21	than 5 percent of a eligible entity's grant award.
22	"(h) Medical Legal Partnership Defined.—
23	The term 'medical legal partnership' means any State or
24	unit of local government and nonprofit that screens and

25 addresses legal issues for veterans, including legal issues

1	related to income security, housing, evictions, family law,
2	public benefits, elder abuse, post-conviction relief, and
3	guardianship.
4	"SEC. 513. AUTHORIZATION OF APPROPRIATIONS.
5	"There is authorized to be appropriated \$6,500,000
6	for each of fiscal years 2022 through 2027 to carry out
7	this chapter.".
8	SEC. 4. STATE VETERANS PILOT JUSTICE ASSISTANCE PRO-
9	GRAM.
10	Section 3 of the Veteran Treatment Court Coordina-
11	tion Act of 2019 (34 U.S.C. 10651a) is amended—
12	(1) by redesignating subsections (c) and (d) as
13	subsections (d) and (e), respectively;
14	(2) by inserting the following new subsection:
15	"(c) Preference.—In awarding grants, the Attor-
16	ney General may provide a grant selection preference to
17	jurisdictions that provide a plan to work with Federal or
18	State medical legal partnerships to reduce recidivism and
19	promote rehabilitation."; and
20	(3) by adding at the end the following new sub-
21	section:
22	"(f) Medical Legal Partnership Defined.—The
23	term 'medical legal partnership' has the meaning given
24	such term in section 512 of the Omnibus Crime Control
25	and Safe Streets Act of 1968.".

1 SEC. 5. VA MEDICAL LEGAL PARTNERSHIPS.

- 2 Section 6304(b) of title 38, United States Code, is
- 3 amended to read as follows:
- 4 "(b) Medical Legal Partnerships.—The Sec-
- 5 retary may establish and maintain medical legal partner-
- 6 ships to screen veterans for civil legal matters associated
- 7 with the provision of health care or other benefits provided
- 8 by the Department and facilitate the provision of no-cost
- 9 legal services at Department facilities.
- 10 "(c) Definitions.—In this section:
- 11 "(1) MEDICAL LEGAL PARTNERSHIP.—The
- term 'medical legal partnership' means has the
- meaning given such term in section 512 of the Om-
- 14 nibus Crime Control and Safe Streets Act of 1968.
- 15 "(2) CIVIL LEGAL MATTERS.—The term 'civil
- legal matters' means non-criminal legal matters, in-
- 17 cluding issues related to health care, housing, gov-
- 18 ernment benefits, employment, educational services,
- family law, post-conviction relief, and trusts and es-
- tates.".