"I’m Not Supposed to Be a Lawyer"

Matthew Cortland

I’m not supposed to be a lawyer. I grew up in a burned-out post-industrial city in Massachusetts, the son of a mechanic and a medical assistant. I didn’t know any lawyers, save the one who met me once at a family function and convinced my parents that I might be “smart enough” to test my way into an elite New England prep school. Once in prep school, I could imagine attending college and being some kind of professional. I made it to college and chose to become a developmental psychologist. I majored in human development (at my undergraduate institution this was, basically, psychology for students who are interested in people instead of rats), and I imagined a career helping kids recover from childhood abuse. I planned to split my professional time: half in clinical settings and the other on research.

Then my health insurance company tried to kill me, and I began to understand that I would have to change plans.

This sounds hyperbolic. It’s not. For some years, I had been using a drug called Remicade to treat my Crohn’s disease, and then it stopped working. I got really sick. My gastroenterologist—a leading physician at one of the nation’s top medical institutions—prescribed a different drug, Humira, which the FDA had approved to treat ulcerative colitis but had not yet approved to treat Crohn’s. My health insurance company denied the prior authorization request, and then we filed a seventy-two-hour emergency appeal.

Seventy-two hours turned into weeks, then months, of stonewalling. The insurance company repeatedly denied having received the paperwork. After I produced definitive evidence that it had, the company claimed that my doctor did not have the authority to file an appeal on my behalf. After I showed the insurance representatives language from their own plan documents that contradicted this claim, they continued to stall. In the meantime, I was rapidly losing weight. I could not eat food without vomiting. I had persistent diarrhea. I was in constant pain, with nothing to manage it. The pain was so extreme that nonexistence seemed preferable to continued suffering.

Ultimately, it was a lawyer who saved my life—the same one who had helped me get into prep school as a kid. I went to see him, at this point carrying a mere 130 pounds on my six-foot frame, and he decided to write the insurance company a demand letter. In retrospect, any legal claim I had was weak—

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this was an aggressive health plan completely immune to state regulation—but the letter worked. By the close of business the next day I had the prior authorization in hand. That was when I realized I might have to become a lawyer, if only to keep myself alive.

After that episode, I tried briefly to pursue my dream career in developmental psychology, even enrolling in Teachers College at Columbia University. It didn’t take long, though, for another health flare to occur, sending me back to my doctors in Massachusetts and to the whims of my health insurance corporation. I decided that if I wanted to be an effective self-advocate, I needed graduate-level training in both public health and law. For reasons of convenience (mainly, access to health care and a generous scholarship), I started with public health.

My public health training was both discouraging and affirming. It was discouraging in that my professors demonstrated so little awareness of the realities of chronic illness. (Case in point: a professor who refused to allow me to reschedule a final exam when I had been admitted to the hospital with a life-threatening small-bowel obstruction.) It was useful in that I came into contact with a lot of health law scholars, and it was clear that I needed their legal-technical knowledge. To put it bluntly, I needed to know how to sue a health insurer.

Unfortunately, the kind of people who really need to know how to sue an insurance company face barriers accessing law school. For applicants with chronic illness, one challenge is that grade point average is a key metric, and the Law School Admissions Council (LSAC) has no mechanism for discounting aberrational semesters. In my case, there was one entire semester in which I was too sick to go to school but couldn’t drop out without losing my health insurance (thus facing the very real possibility of death) and so received all “Fs.” Thankfully, my overall GPA and test scores were still good enough to get me some admissions offers. Following the conventional wisdom at the time (that you go to the highest-ranked school that you get into), I set off for the law school at George Mason University (GMUSL), now the Antonin Scalia Law School.

As that renaming suggests, GMUSL was, and is, extremely conservative. Courses on originalism and law and economics were part of the required curriculum (the former taught by a professor with a National Rifle Association-endowed chair). Koch brothers’ money is unapologetically embraced. When I was there, the student population had been identified as the most conservative in the nation. I went in well aware of all of this. I thought it would be a worthwhile endeavor to spend some time arguing with people whose legal and policy preferences could literally kill me.
What I was unprepared for was the outright hostility toward disability, even as the law school happily told me I was counted in their tally of “underrepresented minorities.”

That hostility emerged as soon as I raised the issue of accommodations. (Basically, I wanted not to be disadvantaged or penalized when I had to get up from class or from an exam to use the restroom.) After producing voluminous medical documentation in support of my request for accommodations (documentation to which I had access only because I had health insurance and a medical team willing to fill out lengthy forms without reimbursement for the effort), and waiting several weeks for a required meeting with disability services on the main GMU campus, I was given many of the accommodations I requested. However, law school officials told me that I could not notify my professors that I was entitled to accommodations. If I did, they said, I would face discipline, even expulsion. Charitably, these officials saw disclosure as a threat to anonymous grading. But their objection demonstrated that they had no understanding of the actual contents of my accommodations and had never thought through whether providing a student additional time on an exam precludes anonymous grading (it does not). I had to request that the main campus intervene before the law school would change course—a terrible way to begin law school.

Things got worse when it came time for law school officials to administer my exam-related accommodations. I recall two occasions during my 1L year when law school administrators miscalculated the time I was allowed on my final exams and notified me of the error partway through the exam.

Professors were no better than administrators when it came to disability accommodations. When I approached one of my 1L professors about my accommodations, he said he hoped I didn’t need anything “silly,” such as a large font. And many professors essentially cross-examined me, asking variations on a question familiar to many disabled students: “But how will I know you aren’t faking?” As if a severe and, at times, life-threatening course of an inflammatory bowel disease might actually just be a way of blowing off class.

After two years of this, it was clear to me that I could handle law school, but also that this law school had taken a toll. Other students complained to the administration about the disability accommodations I had been granted. I was unaware of anyone else at the law school who was chronically ill or disabled. I can think of only two professors who were encouraging (a legal writing instructor and an adjunct who taught trial advocacy). Many others conveyed to me that I had no future in the law—that in light of my illness it would be irresponsible of me to try to practice law; that a character and fitness committee might see it the same way (therefore denying me a license); that even if I did get a license and somehow “bamboozled” a firm into hiring me, I would be out of a job within six months, after I inevitably “blew off” work (i.e., got sick); that no court was going to give me the kind of accommodations I enjoyed in school and that I would fail.
I ended up doing my third year at Suffolk Law School, where I encountered decent people who valued my contributions. But the messages from George Mason stayed with me as I prepared for the bar exam. I knew that disability discrimination was real and that I needed to be strategic. Because several attorneys had told me that states in the West tended to be friendlier to bar takers requesting disability-based accommodations, I paired the bar exam in Massachusetts (where I intended to practice) with the one in Oregon (which did not conflict with Massachusetts).

I passed both exams—but the fact that I felt compelled to take two exams, with a red-eye flight in between, is a damming commentary on the accessibility of the bar. So is my experience applying for accommodations. I spent many hours not only requesting and assembling the correct medical documentation, but also weeding through my records to make sure I appeared “disabled enough” to qualify for accommodations, but not so disabled as to raise red flags with a character and fitness committee. Somehow I threaded that needle. I wasn’t supposed to be a lawyer—by my own lights and according to most of the legal professionals and educators I have encountered. But I became one anyway, because I had to.

This is why I don’t automatically steer people away from law school when they ask me about it—despite everything I’ve recounted here. Often the people who approach me are being oppressed by unjust systems; they are in marginalized positions, particularly with regard to healthcare. And although I often say that being a professional patient taught me more than law school in terms of the skills I now use to keep people alive, the truth is that a law degree often makes an essential difference in these life-or-death battles. When I write letters to benefit agencies and insurance companies and employers, it matters that I have “esquire” after my name.

Thirty years after the enactment of the ADA, legal education and the legal profession still send the message that disabled people are not supposed to be lawyers. Ableism is built into the foundation of the profession. It’s reinforced every time a student’s request for reasonable accommodations is met with hostility, a disabled bar applicant is left behind by dangerous testing conditions during the pandemic, and a disabled first-year associate is pretextually terminated. But as more and more people insist that they need to be lawyers, and as those students build community and power inside of law schools, perhaps the architecture of ableism will finally crumble.