

Issue Brief

2022 SOAR Outcomes

PUBLICATION INFORMATION

Acknowledgments

This document was prepared for the Substance Abuse and Mental Health Services Administration (SAMHSA) under contract number 283-17-5701 with SAMHSA, U.S. Department of Health and Human Services (HHS). Dorrine Gross served as contracting officer representative.

Disclaimer

The views, opinions, and content expressed in this document do not necessarily reflect the official position of SAMHSA or HHS. No official support of or endorsement by SAMHSA or HHS for these opinions or for the instruments or resources described is intended or should be inferred. The information presented should not be considered substitutes for individualized client care and treatment decisions.

Public Domain Notice

All materials appearing in this publication except those taken directly from copyrighted sources are in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. However, this publication may not be reproduced or distributed for a fee without the specific, written authorization of the Office of Communications, SAMHSA, HHS.

Electronic Access and Copies of Publication

This publication may be downloaded from the SAMHSA SSI/SSDI Outreach, Access, and Recovery Technical Assistance Center website, <https://soarworks.samhsa.gov/>.

Recommended Citation

Substance Abuse and Mental Health Services Administration SSI/SSDI Outreach, Access, and Recovery Technical Assistance Center. (2022, November). *2022 SOAR Outcomes*. Retrieved from <https://soarworks.samhsa.gov/article/soar-outcomes-and-impact>.

Originating Office

Division of State and Community Systems Development (DSCSD), Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Rockville, MD 20857.

Nondiscrimination Notice

SAMHSA complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. SAMHSA cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad, o sexo.

First released 2022.

CONTENTS

Overview	1
2022 SOAR Super Stars	2
2022 Outcomes	4
Appeals	4
Impact of COVID-19	5
💡 Resiliency.....	5
🎯 Challenges	6
Funding and Sustainability	7
Implementation of Critical Components	8
Special Populations	9
👤 Veterans.....	9
🍏 Youth in Transition	10
👦 Children.....	11
Collaborations	11
👛 Employment.....	11
🏥 Health Care Providers and Hospitals	12
⚖️ Criminal Justice.....	12
🏠 Projects for Assistance in Transition from Homelessness	13
Cost Savings	14
🏥 Medicaid/Medicare Reimbursement	14
👤 General Assistance	15
Endnotes	16
Table 1. 2022 SOAR-Assisted Initial Application Outcomes	17
Table 2. 2022 SOAR Assisted Appeals Combined	18
Table 3. 2022 SOAR-Assisted Reconsiderations	19
Table 4. 2022 SOAR-Assisted ALJ Hearings	20

OVERVIEW

About SOAR

SSI/SSDI Outreach, Access, and Recovery (SOAR) is a national program designed to increase access to the disability income benefit programs administered by the Social Security Administration (SSA) for eligible adults and children who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder.

SOAR Training

The SAMHSA SOAR Technical Assistance (TA) Center offers two Online Courses that train case workers to assist individuals in applying for SSI/SSDI (SSA's disability income benefit programs). The courses provide comprehensive information about SSI/SSDI and the disability determination process, including the SOAR Critical Components of completing and submitting applications.

SOAR Leadership

State and Local Leads spearhead and coordinate the implementation of SOAR initiatives. These leaders identify and engage stakeholders to participate in steering committees whose goal is to create and implement a SOAR action plan and process for SSI/SSDI application submission. These committees meet regularly to collaborate, report on progress, and troubleshoot challenges.

Contact SOAR

☎ 518-439-7415 x2

✉ soar@prainc.com

🌐 <https://soarworks.samhsa.gov/>



The Substance Abuse and Mental Health Services Administration (SAMHSA) Supplemental Security Income (SSI)/ Social Security Disability Insurance (SSDI) Outreach, Access, and Recovery (SOAR) model helps increase access to Social Security Administration (SSA) disability benefits for eligible adults and children who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or co-occurring substance use disorder.

Over the last 17 years, the SOAR model has been used to assist over 100,332 people who were experiencing or at risk of homelessness with applications for SSI/SSDI, the two disability income benefit programs administered by SSA.

The SAMHSA SOAR TA Center requests voluntary submission of SOAR outcomes from states annually on a fiscal year from July 1 through June 30. The 2022 SOAR fiscal year was July 1, 2021, to June 30, 2022. Unless otherwise noted, these are the data reported in this issue brief.

2022 SOAR Super Stars¹

CONSISTENCY AND IMPACT

DECISIONS

APPROVAL RATE

MARYLAND

1,922 86%

PENNSYLVANIA

4,367 90%

ARKANSAS

1,296 84%

TENNESSEE

2,822 90%

NORTH CAROLINA

3,289 75%

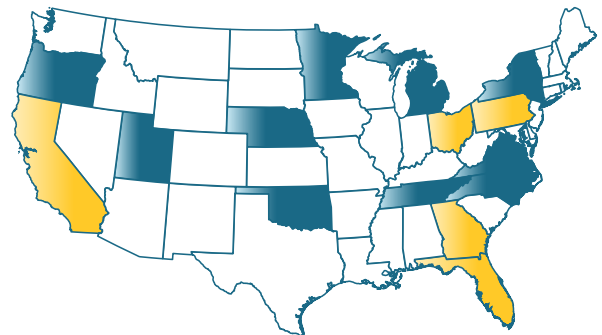
Pennsylvania and Tennessee continue to show the most consistency and impact, receiving large numbers of cumulative decisions (4,367 for Pennsylvania and 2,822 for Tennessee) and maintaining high approval rates (90 percent for both Pennsylvania and Tennessee). Maryland, Arkansas, and North Carolina are also continuously producing impressive numbers: 1,922 decisions with an 86 percent approval rate in Maryland, 1,296 decisions with an 84 percent approval rate in Arkansas, and 3,289 decisions with a 75 percent approval rate in North Carolina.

★ OVER 4,000 DECISIONS

Five states have over **4,000 cumulative decisions**: Florida, Ohio, California, Georgia, and Pennsylvania. Notably, Florida has had 5,149 approvals!

☆ OVER 2,000 APPROVALS

Fifteen states have over 2,000 approvals: Florida, Ohio, California, Georgia, Pennsylvania, Utah, Michigan, Oregon, North Carolina, Minnesota, Tennessee, Nebraska, New York, Oklahoma, and Virginia.



- Over 4,000 decisions and 2,000 approvals
- Over 2,000 approvals

★ TOP APPROVAL RATES

Our “Top Ten” criteria required that states had at least 300 cumulative decisions, approval rates at or above the national average in 2022, and at least 24 decisions in 2022 (2 per month). The average cumulative approval rate for these rock-star states is **81 percent!**

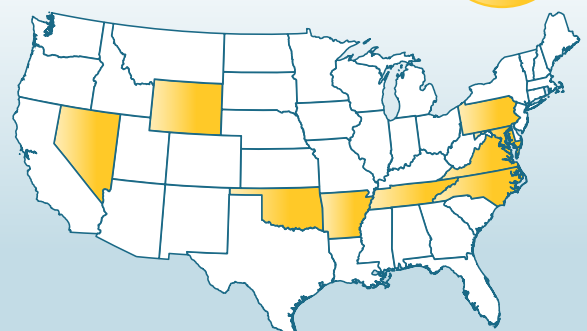
In order of highest average cumulative approval rate, the **Top Ten** states are Pennsylvania, Tennessee, Maryland, Arkansas, North Carolina, Wyoming, Oklahoma, Virginia, Washington, DC, and Nevada. We are proud to welcome Wyoming and Nevada into the “Top Ten” this year!

TOP 10 STATES

- | | |
|----------------|----------------|
| Pennsylvania | Wyoming |
| Tennessee | Oklahoma |
| Maryland | Virginia |
| Arkansas | Washington, DC |
| North Carolina | Nevada |

81%

APPROVAL RATE



📊 MOST IMPROVED CAPACITY

PERCENT INCREASE
IN APPLICATIONS

WYOMING

210%

KANSAS

26%

ARKANSAS

93%

MARYLAND

23%

Wyoming, Arkansas, Kansas, and Maryland showed great improvement in total decisions in 2022 compared to the previous year. Wyoming went from 10 decisions in 2021 to 31 decisions in 2022, a 210 percent increase! Arkansas saw a 93 percent increase in applications, Kansas a 26 percent increase, and Maryland, a 23 percent increase.

📈 MOST IMPROVED APPROVAL RATES

Colorado and Wyoming showed the most improvement in their approval rates from 2021 to 2022! Colorado's approval rate increased 134 percent and Wyoming had a 68 percent increase in approval rate.



📅 MOST IMPROVED DAYS TO DECISION

2021 DAYS
TO DECISION

2022 DAYS
TO DECISION

PERCENT
DECREASE

NORTH CAROLINA

427 158 63%

WASHINGTON, DC

195 142 27%

WYOMING

200 91 55%

SOUTH CAROLINA

123 99 20%

Four states showed great reductions in their average days to decision. North Carolina went from an average of 427 days to decision in 2021 to an average of 158 days in 2022, a 63 percent reduction. Wyoming dropped from an average of 200 days to decision in 2021 to 91 days in 2022, a 55 percent reduction. Washington, DC and South Carolina saw a 27 percent and 20 percent reduction, respectively.

⚙️ CUMULATIVE OUTCOMES

65%

CUMULATIVE INITIAL
APPROVAL RATE

53,877

CUMULATIVE INITIAL
APPROVALS

8,567

CUMULATIVE APPEAL
APPROVALS

62,444

PEOPLE RECEIVING BENEFITS
BECAUSE OF SOAR

Community Spotlight: Success in Colorado

The SAMHSA SOAR TA Center is proud to highlight the fantastic progress made by SOAR caseworkers, Local Leads, and the State Team Lead in Colorado! This year, the state of Colorado saw a significant increase in its initial approval rate, from 59 percent to 84 percent. The strong approval rate is credited to an increased focus on completing the critical components of the SOAR process, including submitting comprehensive Medical Summary Reports, and ensuring quality applications are submitted to SSA and the Disability Determination Services (DDS).

2022 OUTCOMES

Over the last 17 years, the SOAR model has been used to assist over 100,332 people who were experiencing or at risk of homelessness with applications for Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI), the two disability income benefit programs administered by the Social Security Administration (SSA).

Of the applications assisted using SOAR, **65 percent**, representing 53,877 persons have been approved for SSI/SSDI upon *initial* application since SOAR began (Table 1).² An additional 8,567 persons, whose applications were denied initially, were approved on reconsideration or at an Administrative Law Judge (ALJ) Hearing (Table 2). Taken together, since 2006, the SOAR approach

is responsible for assisting **62,444** persons who were experiencing or at risk of homelessness to access Social Security disability income benefits.

In FY2022, there were 2,920 approvals on initial applications. Decisions on SOAR initial applications were received in an average of **153 days** in 2022 with an allowance rate of **68 percent**. This compares to the initial allowance rate of 30 percent for all persons aged 18-64 who applied for SSI or SSDI in FY2020.³

We estimate that in 2022 alone, SSI/SSDI benefits for individuals served by SOAR brought over **\$630 million** into the economies of participating states and localities.

APPEALS

States are continuing to use the SOAR model to assist with applications in the appeals

process, both with reconsiderations and ALJ hearings. In 2022, 895 SOAR-assisted decisions

were rendered at the appeals level, with **41 percent** of all reconsiderations or ALJ hearings resulting in an allowance (see Table 2). SOAR-assisted appeals took an average of **177 days**, as compared to the national average hearing office processing time of 334⁴ days, resulting in applicants receiving lifesaving benefits significantly faster. For those states that track

their outcomes in OAT, we can report on Reconsiderations and ALJ hearings separately. In 2022, there were 551 reconsiderations approved with a 36 percent approval rate in an average of 159 days. SOAR programs assisting at the ALJ hearing level were very successful with a 59 percent approval rate on 123 hearings in an average of 266 days.

IMPACT OF COVID-19

Amid the ongoing COVID-19 pandemic and the resulting closure of SSA field offices, SOAR practitioners continued to change their service delivery methods. From reducing face-to-face engagement and establishing alternative ways to obtain original signatures, to collaborating with SSA field offices to arrange the submission of SSI/SSDI application packets, SOAR practitioners remained creative. The SAMHSA SOAR TA Center asked SOAR State and Local Leads about the impact of COVID-19 on their SOAR programs. Twenty-two SOAR leaders responded with feedback.

Resiliency

- SOAR providers, like the applicants they serve, showed a lot of resiliency. This was illustrated well in the survey results.
 - 73 percent said that providers continued to provide services with physical distancing precautions
 - 27 percent successfully used telehealth for evaluations or ongoing treatment
 - 50 percent established workarounds with SSA to continue submitting applications
- **Pennsylvania:** Despite challenges, one agency processed 13 applications in comparison to the 3 applications processed the previous year. Another agency reports that although they replaced face-to-face contact with a hybrid of remote/phone and mail communication, they were able to continue operations without any suspension or reduction in SOAR services.
- **Maryland:** Despite challenges, they have continued to submit high-quality SOAR applications and maintain a high statewide approval rate.
- **Wisconsin:** Although experiencing a decrease in referrals from providers, one agency continued to receive appropriate self-referrals and was able to meet their contracted numbers. Further, they continue to work on a marketing strategy to help providers make appropriate referrals.
- **Wyoming:** The State Team Lead reports that the pandemic brought about the introduction of telehealth and telemedicine which has been very helpful as Wyoming is extremely rural and there are not providers or SOAR case workers in every county.

🎯 Challenges

- The COVID-19 pandemic also posed some significant challenges for SOAR providers. Of the 22 SOAR leaders that responded to the survey:
 - 64 percent shared that providers could only provide virtual services
 - 41 percent shared that providers paused or discontinued services
 - 55 percent had difficulty arranging needed evaluations for applicants
 - 32 percent shared that consultative exams were canceled or postponed
 - 27 percent did not have access to mail or files in their offices
 - 82 percent reported that communication was delayed or more difficult with SSA and 64 percent reported the same for DDS because of the in-person office closures
 - 68 percent reported that processing times at SSA and DDS were lengthened
- Consultative exams were suspended in many communities, which caused delays in processing applications. Telehealth remained challenging for people experiencing homelessness without access to appropriate technology.
- Several provider agencies experienced staff turnover and shortages, leaving them without SOAR-trained practitioners to implement the process.
- Many medical offices remained closed, causing delays in scheduling appointments, accessing medical records, and obtaining provider signatures on Medical Summary Reports,
- While we received many reports of increased and positive communication with SSA and DDS contacts, some states and communities shared that communication with SSA and DDS was sometimes challenging, and turnover or reduced staffing required that new processes or working relationships be established.



"This year, I am so happy to see the improvements made in Wyoming. The case workers, Local Leads, and agencies have worked so hard to improve approval rates and help those in need. The Wyoming SOAR community has worked overtime to increase OAT utilization, work towards a Workflow Process, and also conduct outreach to areas in Wyoming that were lacking SOAR resources. With the combined efforts of everyone, we have seen such incredible outcomes and I am excited to see what the future has for SOAR here in Wyoming. I am so proud of my team and cannot wait to continue working with them to keep improving SOAR here in Wyoming!"

-Morgan Dougan, SOAR State Team Lead, Treatment Services
Specialist, Behavioral Health Division, Wyoming

FUNDING AND SUSTAINABILITY

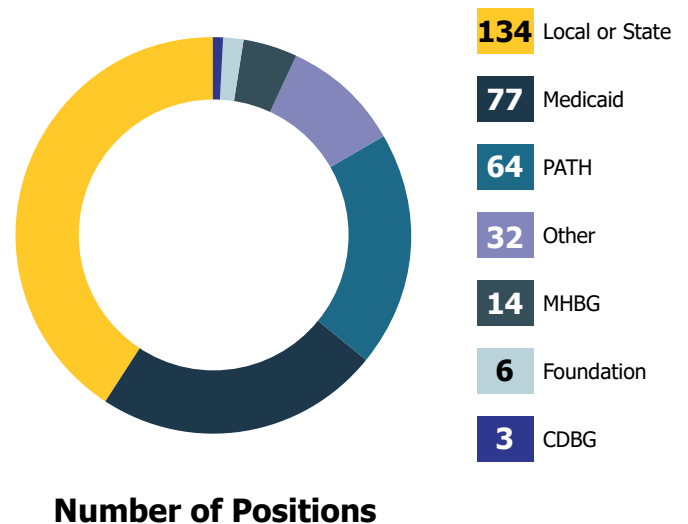
In 2022, 20 states reported that they were successful in securing **new** funding for their SOAR programs. Funding for SOAR programs continues to grow with diverse funding streams. We saw an increase of more than 100 positions from 2021 to 2022.

- Nationwide there are **330 full-time and 114 part-time SOAR-dedicated positions**.
- The average salary for dedicated SOAR benefits specialists as reported by 11 states was \$41,366/year.
- Salary ranges for SOAR staff ranged from 22 to 56 thousand, depending on local cost of living and staff expertise.
- Funding for SOAR positions came from federal programs: Projects for Assistance in Transition from Homelessness (PATH), Community Development Block Grant (CDBG), Mental Health Block Grant (MHBG),

Supportive Services for Veteran Families (SSVF), Medicaid, state and local funds, and foundation funding.

- Securing funding for dedicated positions remains a priority. States reported that it took on average **28 hours of staff time** to complete each SSI/SSDI application.

Figure 1. SOAR-Dedicated Full-Time Position Funding



SPOTLIGHT ON FUNDING: DEDICATED POSITIONS IN TEXAS

Communities across Texas have been very successful in obtaining dedicated funding for SOAR positions. Mission Texarkana secured a grant from the CHRISTUS Community Impact Fund to support one full-time dedicated SOAR position. Three Austin-area agencies received local grant funding from the Ending Community Homelessness Coalition to support the development of dedicated SOAR positions. The funding is associated with a new

initiative known as the Austin Street Outreach Collaborative and comes from private funding through St. David's Foundation, located in the City of Austin. Through this funding, the identified agencies will support four full-time dedicated SOAR positions along with eight additional street outreach positions. Additionally, three Houston-area agencies received local grant funding this year from The Coalition for the Homeless of Houston to

support the development of SOAR-dedicated positions. The new funding source comes from the coalition's Community COVID Housing Program (CCHP) initiative, which seeks to identify creative methods to revamp the city's homeless response systems. The funding

awards are a combination of American Rescue Plan Act funds and private foundation funding. The identified agencies support six full-time SOAR case managers, two SOAR navigators, a SOAR supervisor, and a psychiatrist.

Spotlight: Leveraging Funding for Success in Connecticut

The State of Connecticut Department of Mental Health and Addiction Services (DMHAS) allocated SAMHSA COVID 19 Block Grant funds to create 7 dedicated full-time SOAR positions across the state. The creation of these positions ensures that there are dedicated SOAR staff in each of the Coordinated Access Networks, Connecticut's system for providing homeless services. In the first year, all positions were successfully filled with case workers who have completed the SOAR Online Course: Adult Curriculum. Each newly contracted agency has also created referral processes, met with local service providers, established relationships with the Social Security Administration (SSA) and Disability Determination Services (DDS), and has begun accepting applications. To support these agencies, DMHAS has implemented monthly case conferencing meetings and is currently working on contract language to continue the SOAR positions with Connecticut American Rescue Plan Act (ARPA) funds in developing a Connecticut SOAR application program. In addition, DMHAS is developing a Connecticut SOAR application process, SOAR program manual, and a statewide SOAR certification process to create a more standardized process for training, screening potential applicants, and supporting SOAR-dedicated staff. DMHAS continues working with the Connecticut SSA Public Relations Officer (PRO) to build and maintain successful relationships with local SSA field offices throughout the state.

IMPLEMENTATION OF CRITICAL COMPONENTS

States with higher approval rates cite their capacity for implementing SOAR critical components and their attention to submission

of high-quality applications. The five SOAR critical components⁵ of application assistance include the use of the SSA-1696 Appointment

of Representative form; collection and submission of medical records; writing and submission of a Medical Summary Report, co-signed by an acceptable medical source when possible; and quality review of applications prior to submission. Use of these components statistically increases the likelihood of an approval on initial application for those who are eligible.⁶ Paying attention to SOAR critical components has other benefits as well:

- **Better communication with SSA and DDS.** 98 percent of applications were

submitted using the SSA-1696 Appointment of Representative Form as recommended by SOAR.

- **Better documentation.** 91 percent of applications were submitted with medical records and 68 percent were submitted with a Medical Summary Report.
- **Fewer consultative exams.** Only 25 percent of applications required a consultative examination.

Spotlight on Increased Capacity: Missouri

Missouri is thrilled with the increase in SOAR-trained staff in the state. Compared to the previous reporting period, Missouri saw a 300 percent increase in the number of Online Application Tracking (OAT) system users (13 new users in FY2021 and 39 new users in FY2022). Additionally, the approval rate of applications increased from 62 percent to 69 percent. These improved outcomes are partially due to the new state-wide Housing Liaison program created by the Missouri Department of Mental Health. All Housing Liaisons are SOAR-trained and conduct regular outreach to those experiencing homelessness in their communities in partnership with the local Continua of Care. At the provider level, SOAR-trained program staff are proud to be utilizing SOAR in their communities to serve people experiencing homelessness; one agency reported tripling the number of SOAR-assisted SSI/SSDI applications that were submitted from the previous year.

SPECIAL POPULATIONS

Veterans

SOAR works closely with the U.S. Department of Veterans Affairs (VA) and state and local Veteran initiatives to ensure that those eligible

for SSA benefits are able to apply. Community collaborations include working closely with VA Medical Centers, Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) programs, Supportive

Services for Veteran Families (SSVF) grantees, and many others.

- Twenty-one states reported specific collaborations to serve Veterans in their SOAR programs.
- 267 Veterans were assisted with their applications using SOAR in FY2022.

Youth in Transition

Young adults and youth in transition face particular challenges when applying for SSA disability benefits—they are often too old for

child services but may not be ready or eligible for adult services. However, accessing benefits for this age group is possible, despite myths to the contrary.

- States using the OAT system reported assisting 265 young people ages 18-24 to apply for SSA disability benefits in 2022. These initial applications were decided with a **67 percent approval rate** in an average of 167 days. Cumulatively, SOAR programs have served 3,243 young people with a 69 percent approval rate in 107 days.

Spotlight on Systems-Level Support: New Mexico

The SOAR leadership team in New Mexico has started offering monthly SOAR training opportunities and has had a very good response. The training includes presenters from SSA, DDS, New Mexico Poverty and Law Center, and other community partners. They have started publishing a monthly SOAR newsletter that includes a section highlighting a SOAR specialist from the community. Additionally, they have recently expanded their SOAR Steering Committee to include the State of New Mexico Human Services Department (HSD)—Behavioral Health Services Division (BHSD), additional SOAR Representatives throughout the state, a Physicians' Assistant who works at ABQ Street Connect, and a representative from the Traumatic Brain Injury Resource Center. Heading Home in Albuquerque successfully transitioned to an in-house SOAR program with a dedicated SOAR Program Director and an Assistant, coordinating many SOAR Specialists and have engaged more than 100 individuals from over 25 different community agencies. Heading Home, one of the largest providers of services and shelter to people experiencing homelessness in New Mexico, was awarded close to \$160,000 from the New Mexico HSD, BHSD, allowing them to become the only agency in New Mexico that can take outside referrals. Heading Home has been extremely successful since it first received funding in 2019.

Children

SOAR was originally developed to assist with adult SSI/SSDI applications and has since expanded to include SSI applications for children. The SAMHSA SOAR TA Center has developed several tools and resources for providers working with children and youth including the SOAR Online Course: Child Curriculum. In FY2022 the number of SOAR-

trained case workers who can assist child and youth applicants with applying for benefits grew by 103 and these SOAR-trained case workers were spread across 27 states. These providers have cumulatively received **720 decisions** on child SSI applications with a **73 percent approval rate** in an average of 120 days to decision. In 2022, there were 63 decisions with an **81 percent approval rate** in an average of 199 days.

COLLABORATIONS

Employment

While SOAR seeks to end homelessness through increased access to SSI/SSDI income supports, SOAR also encourages employment as a means to increase individual income and promote recovery. Fourteen states reported collaborations with employment and/or work incentive programs. For example, Kansas

is using new American Rescue Plan (ARP) funding to fund a SOAR position that will also be trained as a Work Incentive Specialist. Employment tracking is still new for SOAR programs, but of the 22 communities that reported, **164 people were working at the time of their SSI/SSDI application** and reported total additional earnings of **\$103,475 or an average of \$631 per applicant.**

Spotlight on Health Care Providers: WC Health in Nevada

WC Health in Nevada has had notable success processing SOAR claims due to internal processes they have established. Offering SOAR services through a clinic allows them to work with the insurance company (Managed Care Organization (MCO)) to get a claims history report that provides accurate information about medical sources, dates of service, and types of treatment rather than solely relying on the claimant to remember. They are also able to request records expeditiously based on the need for continuity of care. This process has saved enormous amounts of time and has increased the quality of claims submitted for adjudication. WC Health is a major contributor to adult SSI/SSDI claims in Nevada, a 2022 Top 10 State!

Health Care Providers and Hospitals

Health care providers that serve uninsured individuals benefit when their patients obtain SSI and the Medicaid coverage that accompanies it in most states. Medicaid can pay for ongoing health care and, in many states, can also provide retroactive payment for uncompensated care. Hospitals are also able to reduce the use of expensive emergency care services by linking patients to ongoing community treatment and support providers.

Twenty-five states reported some or all of the following collaborations with hospitals:

- Agreements with medical records departments for expedited records at no cost
- Easy access to needed assessments
- Dedicated benefits specialist positions within the hospital
- Grant funding to support local nonprofit SOAR programs
- Discharge planning in state hospitals

Spotlight on Medical Respite: Las Vegas

The Recuperative Care Center (RCC) in Las Vegas showed outstanding outcomes from a single case worker, Anthony Morris. In FY2022, he helped 33 people with their SSI/SSDI applications with a 73 percent approval rate in an average of 146 days. These individuals received a total back pay of \$40,848 with an average back pay of \$4,539. RCC is a 40-bed medical respite program that provides medical care 24/7, safe shelter, meals/snacks, case management, and other stabilization services for individuals experiencing homelessness who are too ill/frail for the streets but are not ill/frail enough to remain in the hospital. RCC takes referrals from hospitals, shelters, and outreach staff.

Criminal Justice

To connect individuals leaving correctional facilities or involved in criminal justice systems or specialty courts to needed treatment, it is critical to leverage state and federal investments such as SSI and SSDI. These federal programs can promote access to services that increase the likelihood of post-release success and contribute to the reduction in recidivism.

Collaborations with criminal justice entities were reported by 26 states and communities, including:

- Jail in-reach
- Collaboration with parole and probation to coordinate services
- Specialty courts and jail diversion programs
- Re-entry programs
- Training in state departments of corrections

In FY2022, the reported 70 applicants who were residing in a jail or correctional facility at the time of their application had a 63 percent approval rate in an average of 158

days. Cumulatively, 573 individuals have been assisted with a pre-release application. Of those, 72 percent were approved in an average of 93 days.

Spotlight on Institutional Settings

The Forensic Discharge Pilot project in the state of Virginia expanded from 3 to 11 sites in 2022. The pilot provides pre- and post-release case management services for individuals with serious mental illness who are being discharged from local incarceration. The pilot resulted in the addition of new SOAR-dedicated staff to 7 regions and continued to expand SOAR's reach within pre-release environments. The Virginia General Assembly also approved a request to fund 8 additional SOAR-dedicated case workers within the state hospitals.

Projects for Assistance in Transition from Homelessness

PATH and SOAR programs directly complement each other's work. The PATH program's objective to connect individuals to mental health services and stable housing is more easily accomplished when people experiencing homelessness have access to the income and health insurance that comes with Social Security disability benefits. SOAR provides PATH case managers the tools necessary to expedite access to these benefits, resulting in improved housing and treatment outcomes. In Alabama, PATH providers are making a concerted effort to ensure outreach workers are trained in the SOAR methodology. With no increased funding, one PATH provider, located in an area with the highest reported rates of homelessness, maintained a dedicated SOAR position within their PATH budget. All fifty states report collaboration with the SAMHSA PATH program, including:

- Dedicated benefits specialists on PATH teams (64 full-time, 18 part-time positions)
- SOAR training for PATH outreach and case management staff
- State PATH Contacts serve as SOAR coordinators and leaders

A PATH Success Story: Oklahoma

"I am proud of all 32 programs that I monitor in the homeless and housing programs. They continue to provide outreach and case management services to people experiencing homelessness to assist them with benefits, housing, and other resources to be successful in life! When I completed my site visit review for one of my PATH Providers this spring, she shared this success story with me : The PATH Case Manager was able to help her client apply for Social Security Benefits. He had been living on the streets for over a year, because the shelter made him feel uncomfortable and increased his PTSD and anxiety. He got approved for SSDI, food stamps, and housing. He was also able to locate his long-lost daughter on social media and has rekindled their relationship. His daughter came to see him and introduced him to his granddaughter. He stated he is so happy right now and that God has answered all of his prayers! I interviewed him at my PATH Site review, and he brought his daughter and granddaughter to the interview and seemed so full of joy and happiness! Just writing about it now, makes me smile and remember why I got in this field!"

-Tammie Vail, SOAR State Team Lead, Oklahoma Department of Mental Health and Substance Abuse Services

COST SAVINGS

Medicaid/Medicare Reimbursement

Once an individual is approved for SSI and Medicaid, treatment providers can retroactively bill Medicaid for services provided up to 90 days prior to the SSI protective filing date. This results in reimbursement for previously uncompensated care as well as payment for ongoing treatment. In 2022, ten states reported **\$2,845,305 in Medicaid reimbursement** for

113 individuals, or an average of **\$25,180 per person**, as a result of SOAR. Some states are participating in the Medicaid Administrative Claiming (MAC) program, which helps to defray the cost of certain administrative activities related to providing Medicaid services. Other states are working on establishing billing codes for SOAR services as part of their Medicaid State Plan. Three states reported receiving \$33,596 in Medicare reimbursement this year for seven individuals.

Spotlight on Medicaid: Idaho

Idaho is adding SOAR as an approved reimbursable service through the Idaho State Medicaid system. Medicaid qualified providers who administer case management services through the state Medicaid managed care system will be eligible to also become SOAR certified and be reimbursed for SOAR services at their agency. The SOAR service benefit is scheduled to become live January 1, 2023. Once that occurs, the Idaho State Medicaid system will assist in marketing and outreach to encourage interested agencies in obtaining SOAR training and certification for their staff. With this initiative and a stable funding source for SOAR services, the Idaho SOAR program anticipates an increase in outcomes and overall program sustainability.

General Assistance

Some communities offer a monthly cash stipend to people who are disabled and have low incomes to help cover essential living expenses while they apply for SSI. This general or interim assistance is provided while the SSI application is pending. Once approved, the state or county is reimbursed out of the individual's SSI retroactive payments.

Communities can then use these funds to help support others who need assistance or to fund SOAR efforts to transition people from public assistance to SSI. In Iowa, Pottawattamie County General Assistance funds a full-time SOAR position. Twelve states reported a total **General Assistance reimbursement of \$42,148** for 84 individuals, an average of **\$1,686 per person**.



"Our state has implemented SOAR providers within our contracts through our mental health block grant. We have a strategic plan for building local leads across the state and having more resources available. We are currently working on additional resources to fund SOAR providers that are not contracted with the block grant, and it is headed in a positive direction."

-Jami Hansen, Block Grants Section Supervisor & PATH Grant Manager, SOAR State Team Lead, Montana

FOR MORE INFORMATION

For more more information about SOAR or the SAMHSA SOAR TA Center, visit <https://soarworks.samhsa.gov/> or email soar@prainc.com.

ENDNOTES

- 1 To be considered for inclusion in the Super Stars rankings the state must have had at least 24 decisions in 2022 and have an approval rate at or above the national average for 2022.
- 2 The SAMHSA SOAR TA Center requests voluntary submission of SOAR outcomes from states annually from July 1 through June 30 of each year. Unless otherwise noted, these are the data reported in this issue brief.
- 3 Social Security Administration (September 2022). *SSI Annual Statistical Report, 2021*. Table 70. SSA Pub. No. 13-11827. Washington, D.C.
- 4 Hearing Office Average Processing Time Ranking Report FY 2022 (For Reporting Purposes: 09/25/2021 through 08/26/2022) (https://www.ssa.gov/appeals/DataSets/05_Average_Processing_Time_Report.html)
- 5 <http://soarworks.samhsa.gov/article/soar-model-key-components>
- 6 Kauff, J. F., Clary, E., Lupfer, K. S., Fischer, P. F. (2016). An Evaluation of SOAR: Implementation and Outcomes of an Effort to Improve Access to SSI and SSDI. *Psychiatric Services*, 67(10):1098-1102 (October).

TABLE 1. 2022 SOAR-ASSISTED INITIAL APPLICATION OUTCOMES

State	2022 Decisions	2022 Approvals	2022 Allowance	2022 Average Days	2022 Cumulative Decisions	2022 Cumulative Approvals	2022 Cumulative Allowance Rate
Alabama	12	8	67%	255	258	181	70%
Alaska	13	9	69%	367	190	113	59%
Arizona	31	18	58%	243	419	264	63%
Arkansas	58	54	93%	95	1296	1086	84%
California	151	89	59%	142	6846	3781	55%
Colorado	47	40	85%	241	1258	730	58%
Connecticut	39	12	31%	148	492	296	60%
Delaware	0	0	N/A	N/A	336	229	68%
District of Columbia	25	17	68%	142	657	453	69%
Florida	568	347	61%	163	8202	5149	63%
Georgia	164	97	59%	283	4505	3014	67%
Hawaii	7	3	43%	114	48	32	67%
Idaho	4	2	50%	243	269	154	57%
Illinois	120	77	64%	214	733	435	59%
Indiana	15	8	53%	133	134	70	52%
Iowa	31	20	65%	114	252	158	63%
Kansas	153	100	65%	212	1811	1225	68%
Kentucky	18	13	72%	146	946	609	64%
Louisiana	8	5	63%	248	439	295	67%
Maine	0	0	N/A	N/A	13	10	77%
Maryland	216	189	88%	95	1922	1656	86%
Massachusetts	13	8	62%	108	824	477	58%
Michigan	130	98	75%	138	3683	2344	64%
Minnesota	65	21	32%	153	3135	1867	60%
Mississippi	13	4	31%	175	301	176	58%
Missouri	67	46	69%	143	462	285	62%
Montana	20	12	60%	151	347	191	55%
Nebraska	148	97	66%	165	2577	1476	57%
Nevada	113	84	74%	196	1151	780	68%
New Hampshire	0	0	N/A	N/A	8	6	75%
New Jersey	26	17	65%	247	669	427	64%
New Mexico	46	29	63%	208	1004	677	67%
New York	37	23	62%	131	2449	1446	59%
North Carolina	177	125	71%	158	3289	2483	75%
North Dakota	0	0	N/A	N/A	9	7	78%
Ohio	143	95	66%	120	7670	3945	51%
Oklahoma	236	167	71%	90	2411	1760	73%
Oregon	225	147	65%	123	3391	2320	68%
Pennsylvania	346	314	91%	102	4367	3951	90%
Rhode Island	5	4	80%	231	296	222	75%
South Carolina	39	27	69%	99	555	372	67%
South Dakota	6	5	83%	206	172	139	81%
Tennessee	167	150	90%	135	2822	2539	90%
Texas	322	170	53%	158	1902	927	49%
Utah	1	1	100%	261	3898	1863	48%
Vermont	0	0	N/A	N/A	26	16	62%
Virginia	149	112	75%	159	2296	1656	72%
Washington	13	5	38%	263	537	376	70%
West Virginia	2	1	50%	108	124	90	73%
Wisconsin	51	24	47%	241	1464	869	59%
Wyoming	31	26	84%	91	340	250	74%
Totals	4271	2920	68%	153	83205	53877	65%

TABLE 2. 2022 SOAR ASSISTED APPEALS COMBINED

State	2022 Appeals Decisions	2022 Appeals Approvals	2022 Appeals Allowance	2022 Appeals Average Days	2022 Cumulative Decisions	2022 Cumulative Approvals	2022 Cumulative Allowance Rate
Alabama	1	1	100%	365	24	20	83%
Alaska	3	1	33%	185	29	10	34%
Arizona	5	2	40%	229	88	45	51%
Arkansas	2	2	100%	96	317	250	79%
California	30	15	50%	149	893	465	52%
Colorado	19	8	42%	177	162	112	69%
Connecticut	29	8	28%	119	195	73	37%
Delaware	0	0	N/A	N/A	5	3	60%
District of Columbia	4	1	25%	81	159	78	49%
Florida	128	55	43%	174	1507	722	48%
Georgia	29	17	59%	479	887	449	51%
Hawaii	1	1	100%	639	7	7	100%
Idaho	1	1	100%	219	103	38	37%
Illinois	76	36	47%	175	305	139	46%
Indiana	3	0	0%	204	40	14	35%
Iowa	12	6	50%	98	124	62	50%
Kansas	38	7	18%	159	500	247	49%
Kentucky	6	0	0%	137	257	139	54%
Louisiana	1	1	100%	246	146	93	64%
Maine	0	0	N/A	N/A	1	1	100%
Maryland	0	0	N/A	N/A	297	228	77%
Massachusetts	4	1	25%	446	81	40	49%
Michigan	18	7	39%	160	779	524	67%
Minnesota	27	3	11%	98	862	324	38%
Mississippi	3	2	67%	65	25	12	48%
Missouri	1	1	100%	291	39	28	72%
Montana	6	3	50%	73	80	44	55%
Nebraska	39	12	31%	139	789	287	36%
Nevada	23	9	39%	159	370	216	58%
New Hampshire	0	0	N/A	N/A	0	0	N/A
New Jersey	11	8	73%	326	250	167	67%
New Mexico	7	4	57%	174	249	156	63%
New York	14	8	57%	159	597	330	55%
North Carolina	30	11	37%	155	824	541	66%
North Dakota	0	0	N/A	N/A	1	1	100%
Ohio	18	6	33%	151	231	73	32%
Oklahoma	37	27	73%	150	186	137	74%
Oregon	65	21	32%	N/A	1158	504	44%
Pennsylvania	9	1	11%	125	185	87	47%
Rhode Island	0	0	N/A	N/A	183	109	60%
South Carolina	7	3	43%	98	117	55	47%
South Dakota	0	0	N/A	N/A	18	14	78%
Tennessee	3	1	33%	197	108	66	61%
Texas	113	48	42%	271	651	240	37%
Utah	0	0	N/A	N/A	1618	509	31%
Vermont	1	1	100%	55	9	5	56%
Virginia	28	14	50%	193	496	287	58%
Washington	8	5	63%	180	42	18	43%
West Virginia	0	0	N/A	N/A	86	25	29%
Wisconsin	33	12	36%	246	427	197	46%
Wyoming	2	1	50%	100	30	10	33%
Totals	895	371	41%	188	16537	8201	50%

TABLE 3. 2022 SOAR-ASSISTED RECONSIDERATIONS

State	2022 Reconsideration Decisions	2022 Reconsideration Approvals	2022 Reconsideration Allowance Rate	2022 Reconsideration Average Days
Alabama	1	1	100%	365
Alaska	3	1	33%	185
Arizona	4	2	50%	286
Arkansas	2	2	100%	96
California	22	10	45%	107
Colorado	12	4	33%	162
Connecticut	27	7	26%	107
Delaware	0	0	N/A	N/A
District of Columbia	4	1	25%	81
Florida	96	35	36%	172
Georgia	23	13	57%	474
Hawaii	0	0	N/A	N/A
Idaho	1	1	100%	219
Illinois	31	12	39%	153
Indiana	3	0	0%	204
Iowa	2	1	50%	120
Kansas	35	5	14%	118
Kentucky	4	0	0%	124
Louisiana	0	0	N/A	N/A
Maine	0	0	N/A	N/A
Maryland	0	0	N/A	N/A
Massachusetts	2	0	0%	52
Michigan	14	5	36%	106
Minnesota	27	3	11%	98
Mississippi	3	2	67%	65
Missouri	1	1	100%	291
Montana	6	3	50%	73
Nebraska	37	11	30%	140
Nevada	21	8	38%	170
New Hampshire	0	0	N/A	N/A
New Jersey	3	2	67%	101
New Mexico	5	3	60%	217
New York	13	7	54%	147
North Carolina	29	10	34%	157
North Dakota	0	0	N/A	N/A
Ohio	17	5	29%	146
Oklahoma*	0	0	N/A	N/A
Oregon	0	0	N/A	N/A
Pennsylvania	8	1	13%	118
Rhode Island	0	0	N/A	N/A
South Carolina	6	2	33%	97
South Dakota	0	0	N/A	N/A
Tennessee	3	1	33%	197
Texas	38	16	42%	119
Utah	0	0	N/A	N/A
Vermont	1	1	100%	55
Virginia	21	10	48%	160
Washington	5	3	60%	143
West Virginia	0	0	N/A	N/A
Wisconsin	19	6	32%	239
Wyoming	2	1	50%	100
Totals	551	196	36%	170

*These states do not track outcomes in OAT so were unable to report their appeals separately.

TABLE 4. 2022 SOAR-ASSISTED ALJ HEARINGS

State	2022 ALJ Hearing Decisions	2022 ALJ Hearing Approvals	2022 ALJ Hearing Allowance Rate	2022 ALJ Hearing Average Days
Alabama	0	0	N/A	N/A
Alaska	0	0	N/A	N/A
Arizona	1	0	0%	N/A
Arkansas	0	0	N/A	N/A
California	8	5	63%	266
Colorado	7	4	57%	203
Connecticut	2	1	50%	279
Delaware	0	0	N/A	N/A
District of Columbia	0	0	N/A	N/A
Florida	32	20	63%	178
Georgia	6	4	67%	497
Hawaii	1	1	100%	639
Idaho	0	0	N/A	N/A
Illinois	7	6	86%	217
Indiana	0	0	N/A	N/A
Iowa	2	1	50%	73
Kansas	3	2	67%	633
Kentucky	2	0	0%	164
Louisiana	1	1	100%	246
Maine	0	0	N/A	N/A
Maryland	0	0	N/A	N/A
Massachusetts	2	1	50%	840
Michigan	4	2	50%	348
Minnesota	0	0	N/A	N/A
Mississippi	0	0	N/A	N/A
Missouri	0	0	N/A	N/A
Montana	0	0	N/A	N/A
Nebraska	2	1	50%	105
Nevada	2	1	50%	39
New Hampshire	0	0	N/A	N/A
New Jersey	2	2	100%	662
New Mexico	2	1	50%	67
New York	1	1	100%	313
North Carolina	1	1	100%	110
North Dakota	0	0	N/A	N/A
Ohio	1	1	100%	242
Oklahoma*	0	0	N/A	N/A
Oregon	0	0	N/A	N/A
Pennsylvania	1	0	0%	182
Rhode Island	0	0	N/A	N/A
South Carolina	1	1	100%	104
South Dakota	0	0	N/A	N/A
Tennessee	0	0	N/A	N/A
Texas	8	4	50%	381
Utah	0	0	N/A	N/A
Vermont	0	0	N/A	N/A
Virginia	7	4	57%	291
Washington	3	2	67%	242
West Virginia	0	0	N/A	N/A
Wisconsin	14	6	43%	254
Wyoming	0	0	N/A	N/A
Totals	123	73	59%	274

*These states do not track outcomes in OAT so were unable to report their appeals separately.