

2018 SOAR Outcomes

SSI/SSDI Outreach, Access, and Recovery (SOAR) helps states and communities increase access to Social Security disability benefits for eligible adults who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or a co-occurring substance use disorder. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the SOAR Technical Assistance (TA) Center develops and provides systems planning, training, and technical assistance to support the implementation of SOAR nationwide.

2018 SOAR Super Stars



Consistency and Impact. Pennsylvania and Tennessee have shown the most consistency and impact, receiving large numbers of cumulative decisions (2,880 for Pennsylvania and 2,037 for Tennessee) and maintaining high approval rates (91 percent for Pennsylvania and 90 percent for Tennessee). North Carolina and Maryland are also continuously producing impressive numbers: 2,432 decisions with a 79 percent approval rate in North Carolina and 1,123 decisions with an 86 percent approval rate in Maryland.



Over 3,000 Decisions. Six states have over 3,000 cumulative decisions: Ohio, Florida, California, Utah, Georgia, and Michigan.



Over 2,000 Decisions. Six states have between 2,000 and 3,000 decisions: Pennsylvania, Oregon, North Carolina, Minnesota, New York, and Tennessee.



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 2018, and at least 24 decisions in 2018 (2 per month). The average approval rate for these rock star states is **82 percent!** In order of highest average cumulative approval rate, the **Top Ten States** are: Pennsylvania; Tennessee; Maryland; Arkansas; North Carolina; Washington; Oklahoma; Washington, DC; Virginia; and New Mexico.



Most Improved Capacity. Oklahoma, Oregon, California, Arkansas, South Carolina, and Washington, DC showed great improvement in total decisions and approvals in 2018 from what they reported the previous year. Collectively, these 6 states **went from 568 decisions in a year to 1,510 decisions** in the following year. **That is a 166% increase!**



Most Improved Days to Decision. Four states showed great reductions in their average days to decision. New Mexico, Indiana, Montana, and Nevada dropped from an average of 170 days to decision in 2017 to 117 days in 2018. Collectively, that is **a reduction of 53 days on average!**

Note: To be considered for inclusion in the Super Stars rankings, the state must have had at least 24 decisions in 2018.



Overview

Over the last 13 years, the SOAR approach has been used to assist over 71,705 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 39,213 persons have been approved for SSI/SSDI upon **initial** application since SOAR began (Table 1).¹ An additional 5,924 persons, whose applications were denied initially, were approved on reconsideration or appeal (Table 2). Taken together since 2006, the SOAR approach is responsible for assisting **45,137** persons who were experiencing or at risk of homelessness to access Social Security disability income benefits.

In 2018, there were 4,294 approvals on initial applications. Decisions on SOAR initial applications were received in an average of **100 days** in 2018 with an allowance rate of **65 percent**. This compares to the initial allowance rate of 29 percent for all persons aged 18-64 who applied for SSI or SSDI in 2017.²

We estimate that in 2018 alone, SSI/SSDI for the individuals served by SOAR brought over **\$406 million** into the economies of participating states and localities.

Appeals

States are increasingly using the SOAR approach to assist with applications in the appeals process, both with reconsiderations and hearings by an Administrative Law Judge (ALJ). In 2018, 1,270 SOAR-assisted decisions were rendered at the appeals level, with **42 percent** of all reconsiderations or ALJ hearings resulting in an allowance (see Table 2). SOAR-assisted appeals take an average of **141 days**, as compared to the national average hearing office processing time of 591³ days, resulting in applicants receiving life-saving benefits over four times faster.

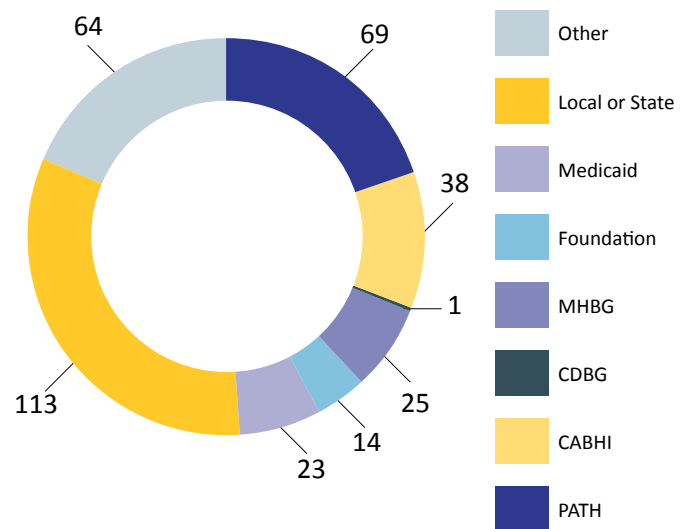
Funding and Sustainability

In 2018, 17 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.

- Nationwide there are **261 full-time and 86 part-time SOAR-dedicated positions**.

- The average salary for dedicated SOAR benefits specialists as reported by 28 states was \$39,000 per year.
- Salary ranges for SOAR staff ranged from 25 to 55 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], Cooperative Agreements to Benefit Homeless Individuals, Community Development Block Grant, Community Mental Health Services Block Grant, 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 **24 hours of staff time** to complete each SSI/SSDI application.

Figure 1. Funding for 347 Full- and Part-time SOAR Positions



Implementation of Critical Components

States with higher approval rates cite their capacity for implementing SOAR critical components⁴ and their attention to submission of high-quality applications. The five SOAR critical components 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

1 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.
2 Social Security Administration. (2018). *SSI Annual Statistical Report, 2017* (SSA Publication No. 13-11827). Retrieved from: https://www.ssa.gov/policy/docs/statcomps/ssi_asr/
3 To be considered for inclusion in the Super Stars rankings the state must have had at least 24 decisions in 2018.
4 The SOAR Model: Key Components. (n.d.). Retrieved from <https://soarworks.prainc.com/article/soar-model-key-components>

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 eligible⁵. Paying attention to SOAR critical components has other benefits as well:

- **Better communication with SSA and DDS.** Ninety-seven percent of applications were submitted using the SSA-1696 Appointment of Representative Form as recommended by SOAR.
- **Better documentation.** Eighty-eight percent of applications were submitted with medical records and 68 percent were submitted with a Medical Summary Report.
- **Fewer consultative exams.** Only 26 percent of applications required a consultative examination.

ensure 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, SSVF grantees, and many others.

- Forty-two states reported assisting Veterans with their disability applications.
- Eight hundred ninety-two (892) Veterans were assisted with their applications using SOAR.
- In the June 2018 VA, HUD, and United States Interagency Council on Homelessness Community Planning Survey, 250 out of 366 respondents (68 percent) indicated that they are using the SOAR model in their HUD Continuum of Care (CoC) to help Veterans with disabling conditions access SSI/SSDI. An additional 66 respondents (18 percent) are in the process of implementing the SOAR model to serve Veterans.



Spotlight on Virginia: SOARing While Growing

Virginia has made great progress toward statewide implementation of SOAR, ensuring that all regions of the state have active SOAR-trained case managers. The SOAR State Team Lead, Georgi Fisher, has worked to ensure that all SOAR-trained case managers have the ability to attend an in-person SOAR Online Course Review Session, where they review SOAR critical components, network with other case managers, and meet their state and local contacts. The leadership has also worked with the Social Security Administration (SSA) to identify four regional SSA representatives that ensure that SOAR applications are processed through SSA and Disability Determination Services (DDS) quickly and effectively. Each hospital in the Virginia State Hospital System has SOAR-trained staff who are able to assist eligible applicants prior to discharge. Additionally, DDS is collaborating with state hospital physicians on best practices for writing disability reports and medical evaluations. The State Team Lead has focused on developing local leadership and building community infrastructure for SOAR by meeting with each community, identifying their needs, and addressing any barriers to SOAR success. In 2018, Virginia achieved a 71 percent cumulative approval rate on 1,683 applications in an average of 87 days.

Special Populations

Veterans

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



Veterans Spotlight

In July 2018, VA released the [VA Income and Benefits Calculator](#), an innovative new tool to help SSI/SSDI beneficiaries maximize their income by pursuing employment using SSA work incentives. The SAMHSA SOAR TA Center has been working in partnership with VA to encourage both Veterans and non-Veterans to use this tool to illustrate that employment is possible while receiving SSA disability benefits.

Youth in Transition

Young adults and youth in transition face particular challenges when applying for SSA disability benefits, including the fact that 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 Online Application Tracking (OAT) system reported assisting 402 youth ages 18-24 to apply for SSA disability benefits in 2018. These initial applications were decided with a **63-percent approval rate** in an average of 96 days.
- Appeals at the reconsideration and ALJ hearing level were also successful for this age group. Based on state reports, 52 youth were assisted with appeals with an approval rate of 46 percent in 136 days.

⁵ 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.

★ *Quote from the Field*

“I’m grateful for the opportunity to put emotion, passion, and heart into painting the picture of the hard work our team does in Ohio and what SOAR experts are doing all over the United States. This is how we build relationships, partnerships, and collaboration. This is how we grow our programs and our SOAR initiatives in each of our states and nationwide. But the most important part to all of the work we do, this is how we offer support and belief in our most vulnerable community members.”

– **Amy Lamerson, MSW**, SOAR Ohio Program Manager, Ohio SOAR State Team Lead

Children

SOAR was originally developed to assist with adult SSI/SSDI applications and has recently expanded to include SSI applications for children. The SAMHSA SOAR TA Center has developed a number of tools and resources for providers working with children and youth, including the **SOAR Online Course: Child Curriculum**. Select providers in Arkansas, Florida, Kansas, and Nevada have been implementing SOAR with children and tracking their outcomes in OAT. Since 2008, these providers have received 388 decisions on child SSI applications with a 71-percent approval rate in an average of 105 days to decision.

American Indians and Alaska Natives

American Indians and Alaska Natives (AIAN) may be eligible for SSI and/or SSDI benefits if they meet the non-medical and medical eligibility requirements. Status as AIAN does not preclude someone from receiving SSA disability benefits. SOAR and access to SSI/SSDI benefits can be a key step on the road to recovery by providing a stable source of income to tribal members. SSI/SSDI supplements existing resources, such as tribal income and provides additional health insurance and treatment options to complement tribal healthcare. Six states reported collaborations with AIAN communities this year.

Collaborations

Employment

SOAR seeks to end homelessness through increased access to SSI/SSDI income supports, an essential first step for many persons in recovery. However, SOAR also encourages employment as a means to increase individual income and promote recovery. Twenty-one states reported collaborations with employment and/or work incentive programs. Employment tracking is still new for SOAR programs, but of the 36 communities that reported,



Spotlight on Ohio: COHHIO’s Leadership

The Coalition on Homelessness and Housing in Ohio (COHHIO) provides leadership, support, and training to the state’s SOAR providers under the direction of SOAR Ohio Program Manager and State Team Lead, Amy Lamerson.

COHHIO uses OAT as a management tool, by regularly reviewing SOAR data to identify opportunities for targeted technical assistance to providers. COHHIO’s SOAR Leadership also conducts quality review of hard copy case files and materials collected for SOAR-assisted applications, and offers guidance and support to increase the quality of applications submitted to SSA. Supplemental training to referral agencies on identifying appropriate SOAR candidates, Social Security’s definition of disability, and Ohio’s SOAR process is conducted regularly to support SOAR providers across the state.

Due to these support and training efforts, Ohio has seen an increase in the number of individuals served and in the approval rates for both initial and reconsideration claims. COHHIO used these improved outcomes to advocate for SOAR and open the door to funding opportunities. Their results have been incredible! In 2018, COHHIO secured \$700,000 in funding for SOAR Ohio Project Agencies and specialists in Ohio communities from the Ohio Department of Medicaid (ODM), Money Follows the Person (MFP), HOMEChoice. Ohio will surely keep SOARing in Fiscal Year 2019.

201 people were working at the time of their SSI/SSDI application and reported total additional earnings of **\$106,642 or an average of \$531 per applicant.**

Hospitals

Hospitals that serve uninsured individuals benefit when their patients obtain SSI and the Medicaid coverage that accompanies the SSI benefit 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. Collaborations with hospitals were reported by 32 states, for some or all of the following:

- Agreements with medical records departments for expedited records at no cost
- Easy access to needed assessments
- Dedicated benefits specialist positions within the hospital



Spotlight on Minnesota: SOAR Collaboration

The Minnesota Social Security Advocacy and SOAR team’s mission is to “assist people with the Social Security disability process so they can live in dignity and achieve their highest potential.” Currently, two agencies have full-time dedicated SOAR advocates and have seen an increase in efficiency and application approvals. The success of these SOAR-dedicated staff helped the state develop the 2019 Request for Proposal (RFP) to expand the number of contracted agencies with SOAR-certified dedicated staff; improve access to Social Security disability benefits for individuals experiencing or at risk of homelessness; and strengthen the SOAR collaborative presence in regional homelessness response systems. This fiscal year, Minnesota increased the number of Social Security disability decisions by 66 percent (281 decisions) and increased the approval rates on initial applications from 48 percent in 2017 to 61 percent in 2018.

The Minnesota SOAR Leadership Team is positioned within the Department of Human Services. Through collaboration with SSA and DDS, the team was able to develop a streamlined procedure at all of Minnesota’s local SSA Field Offices this past year. In addition, the SOAR Leadership Team established a Memorandum of Understanding (MOU) between the DHS and SSA to allow patients to apply for Social Security disability benefits 120 days before being released from the facility. This gives staff an extra 30 days to gather documentation from DHS facilities before patients are released. Through these collaborations, the state is well on its way to meeting the goal set in Minnesota’s 2018-2020 Action Plan: Prevent and End Homelessness by creating connections to employment and economic assistance programs as part of coordinated entry, and devise a strategy to ensure all participants are screened for Social Security disability benefits and referred to a Social Security disability or SOAR advocate for assistance.

- Grant funding to support local nonprofit SOAR programs
- Discharge planning in state hospitals

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 31 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

The 60 applicants who were residing in a jail or correctional facility at the time of their application had a 67-percent approval rate in an average of 100 days.

Spotlight on Oklahoma: Department of Corrections Collaborations



The Oklahoma Department of Mental Health and Substance Abuse Services, Department of Corrections (DOC), and the Disability Determination Division (DDD) have a collaborative process that supports efficient and quality SSI/SSDI applications with the goal of increasing first-time application approvals for incarcerated individuals with serious mental illness. Social services specialists, discharge managers, and psychologists each play key roles in the process, and SSA and DDD have written policies and procedures for flagging and reviewing applications received from this population. Offenders designate DOC personnel as their appointed representative, electronic applications are thoroughly completed 6 months or less prior to the projected release date, psychological summaries and additional relevant medical information is faxed referencing the respective bar code created by the DDD, and follow up telephone interviews with DDD are coordinated when necessary. The completion of the appropriate consent forms support direct communication between prison-based and SSA/DDD personnel. In 2018, Oklahoma DOC staff assisted with 302 SSI/SSDI applications and achieved a 75-percent approval rate.

Projects for Assistance in Transition from Homelessness (PATH)

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

★ *Quote from the Field*

“I am most proud of implementing SOAR into our coordinated entry system. We have amazing collaborations with our local health care and housing service providers to be able to develop a formalized SOAR system. We are working to connect the most vulnerable individuals experiencing homelessness in our community to benefits as quickly and efficiently as possible.”

– **Niki Kozak**, SOAR Local Lead, Austin, Texas



Spotlight on Texas: Integration into Coordinated Entry

Over the past few years Texas has made great progress toward statewide implementation of SOAR by developing local leadership and building community infrastructure for SOAR implementation within the HUD CoC system. The Texas Homeless Network (THN) both coordinates the CoC system and leads SOAR in Texas. Since 2012, 6 local CoCs were awarded federally sponsored SOAR technical assistance and training.

The Austin/Travis County and the Houston/Harris County CoCs have incorporated SOAR eligibility questions into their coordinated entry assessments, so that individuals who may qualify for Social Security disability benefits receive immediate referrals to local SOAR providers. Through Coordinated Assessment, Austin is seeing an increase in funding opportunities to build SOAR capacity. Suzie Brady, Austin Local Lead says, “I’m so proud of the growth of SOAR within my agency – we now have 14 employees that are trained and completing claims utilizing the SOAR process. Three of those employees are dedicated SOAR Specialists! Our agency has definitely recognized the value of SOAR and how the process can help our clients in so many ways!”

Houston’s “The Way Home Continuum of Care” recognizes the important impact of income on housing stability and overall health and well-being for persons and families experiencing homelessness. According to Gary Grier, Houston Local Lead, “The Income Now initiative, started in 2016, connects clients to housing and income interventions through Coordinated Access. We are proud and thankful for the service coordination in our community to identify, link, and deliver SOAR services to those with the most need.” Likewise, Houston Local Lead, Lyla Ordonez emphasizes, “Our SOAR programs are all flourishing! I am proud to be a part of growth in our SOAR program by having six committed full-time SOAR workers—this is a huge accomplishment for our Houston community!”

improved housing and treatment outcomes. All 50 states report collaboration with the SAMHSA PATH program, including:

- Dedicated benefits specialists on PATH teams (56 full-time, 13 part-time positions)
- SOAR training for PATH outreach and case management staff
- State PATH contacts serve as SOAR coordinators and leaders

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 2018, 9 states reported **\$650,348 in Medicaid reimbursement** for 143 individuals, or an average of **\$4,548 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. Four states reported receiving \$31,413 in Medicare reimbursement this year for 7 individuals.

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. Seven states reported a total **General Assistance reimbursement of \$375,202** for 113 individuals, an average of **\$3,320 per person**.

For More Information

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

Disclaimer

The views, opinions, and content expressed in this document do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), SAMHSA, or the U.S. Department of Health and Human Services (HHS).

Table 1. 2018 SOAR-Assisted Initial Application Outcomes

State	2018 Decisions	2018 Approvals	2018 Allowance	2018 Average Days	New Cumulative Decisions	New Cumulative Approvals	Cumulative Allowance Rate
Alabama	19	12	63%	116	204	145	71%
Alaska	5	2	40%	38	122	71	58%
Arizona	29	17	59%	116	351	225	64%
Arkansas	66	58	88%	112	998	832	83%
California	214	168	79%	132	3992	2276	57%
Colorado	59	37	63%	147	1021	603	59%
Connecticut	54	33	61%	133	358	225	63%
Delaware	6	1	17%	56	321	221	69%
District of Columbia	113	82	73%	120	443	319	72%
Florida	667	411	62%	89	5095	3366	66%
Georgia	363	228	63%	171	3595	2364	66%
Hawaii	0	0	N/A	N/A	29	25	86%
Idaho	32	15	47%	79	242	133	55%
Illinois	61	28	46%	122	428	276	64%
Indiana	26	6	23%	79	62	32	52%
Iowa	29	17	59%	83	149	89	60%
Kansas	166	96	58%	116	1167	821	70%
Kentucky	32	21	66%	74	883	564	64%
Louisiana	23	19	83%	147	355	234	66%
Maine	3	2	67%	59	13	10	77%
Maryland	134	110	82%	90	1123	961	86%
Massachusetts	84	51	61%	114	714	413	58%
Michigan	195	144	74%	102	3100	1913	62%
Minnesota	164	100	61%	142	2354	1512	64%
Mississippi	31	19	61%	225	198	126	64%
Missouri	42	26	62%	138	212	113	53%
Montana	32	19	59%	60	197	96	49%
Nebraska	275	137	50%	97	1539	880	57%
Nevada	171	112	66%	125	715	466	65%
New Hampshire	0	0	N/A	N/A	7	6	86%
New Jersey	25	23	92%	149	553	346	63%
New Mexico	89	73	82%	135	750	525	70%
New York	91	42	46%	89	2275	1337	59%
North Carolina	360	265	74%	95	2432	1911	79%
North Dakota	0	0	N/A	N/A	8	6	75%
Ohio	752	380	51%	85	6520	3280	50%
Oklahoma	459	345	75%	88	1306	964	74%
Oregon	584	377	65%	71	2475	1708	69%
Pennsylvania	364	313	86%	67	2880	2625	91%
Rhode Island	19	12	63%	57	256	194	76%
South Carolina	74	51	69%	78	324	215	66%
South Dakota	18	13	72%	158	150	123	82%
Tennessee	197	171	87%	68	2037	1836	90%
Texas	208	99	48%	111	763	451	59%
Utah	3	3	100%	114	3896	1861	48%
Vermont	2	2	100%	38	15	10	67%
Virginia	150	99	66%	87	1683	1187	71%
Washington	28	20	71%	95	437	331	76%
West Virginia	2	2	100%	52	114	87	76%
Wisconsin	46	27	59%	115	1113	716	64%
Wyoming	8	6	75%	76	252	183	73%
Totals	6574	4294	65%	100	60226	39213	65%

Table 2: 2018 SOAR-Assisted Appeals Outcomes

State	2018 Decisions	2018 Approvals	2018 Allowance	2018 Average Days	New Cumulative Decisions	New Cumulative Approvals	Cumulative Allowance Rate
Alabama	3	1	33%	40	22	18	82%
Alaska	2	0	0%	N/A	22	8	36%
Arizona	4	0	0%	48	73	40	55%
Arkansas	0	0	N/A	N/A	305	245	80%
California	21	7	33%	91	383	158	41%
Colorado	2	1	50%	74	108	92	85%
Connecticut	32	12	38%	253	112	42	38%
Delaware	1	0	0%	57	5	3	60%
District of Columbia	17	7	41%	111	113	62	55%
Florida	192	86	45%	180	807	414	51%
Georgia	65	31	48%	131	730	356	49%
Hawaii	0	0	N/A	N/A	5	5	100%
Idaho	14	5	36%	210	94	35	37%
Illinois	17	3	18%	132	76	37	49%
Indiana	7	3	43%	94	15	6	40%
Iowa	13	8	62%	93	70	32	46%
Kansas	37	18	49%	148	309	179	58%
Kentucky	3	0	0%	51	239	136	57%
Louisiana	2	1	50%	454	121	77	64%
Maine	1	1	100%	617	1	1	100%
Maryland	26	20	77%	116	274	208	76%
Massachusetts	13	6	46%	92	41	22	54%
Michigan	11	5	45%	533	714	487	68%
Minnesota	117	35	30%	361	465	224	48%
Mississippi	3	2	67%	164	12	6	50%
Missouri	2	2	100%	120	29	23	79%
Montana	5	2	40%	157	61	33	54%
Nebraska	69	13	19%	95	530	213	40%
Nevada	16	2	13%	80	247	164	66%
New Hampshire	0	0	N/A	N/A	0	0	N/A
New Jersey	19	12	63%	146	183	119	65%
New Mexico	29	24	83%	208	188	126	67%
New York	0	0	N/A	N/A	543	297	55%
North Carolina	77	38	49%	163	608	421	69%
North Dakota	0	0	N/A	N/A	1	1	100%
Ohio	53	21	40%	84	114	33	29%
Oklahoma	9	5	56%	62	9	5	56%
Oregon	235	98	42%	1	819	381	47%
Pennsylvania	5	1	20%	282	148	74	50%
Rhode Island	4	1	25%	41	176	106	60%
South Carolina	8	4	50%	94	78	40	51%
South Dakota	3	3	100%	73	17	13	76%
Tennessee	13	7	54%	163	74	39	53%
Texas	68	16	24%	92	170	50	29%
Utah	0	0	N/A	N/A	1618	509	31%
Vermont	0	0	N/A	N/A	4	2	50%
Virginia	32	19	59%	170	376	223	59%
Washington	3	2	67%	117	13	4	31%
West Virginia	0	0	N/A	N/A	85	25	29%
Wisconsin	17	10	59%	236	250	124	50%
Wyoming	0	0	N/A	N/A	22	6	27%
Totals	1270	532	42%	141	11479	5924	52%