

*Issue Brief*

# 2021 SOAR Outcomes

# PUBLICATION INFORMATION

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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.

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# 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](mailto: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 16 years, the SOAR model has been used to assist over **95,166** 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 2021 SOAR fiscal year was July 1, 2020, to June 30, 2021. Unless otherwise noted, these are the data reported in this issue brief.

# 2021 SOAR Super Stars<sup>1</sup>

## CONSISTENCY AND IMPACT

DECISIONS

APPROVAL RATE

MARYLAND

1,706 86%

PENNSYLVANIA

4,021 90%

ARKANSAS

1,238 83%

TENNESSEE

2,655 90%

NORTH CAROLINA

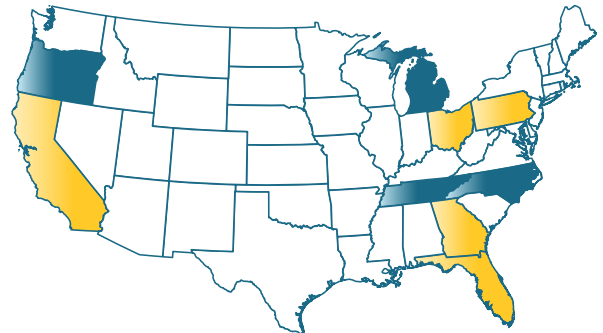
3,112 76%

Pennsylvania and Tennessee continue to show the most consistency and impact, receiving large numbers of cumulative decisions (4,021 for Pennsylvania and 2,655 for Tennessee) and maintaining high approval rates (90% for both Pennsylvania and Tennessee).

Maryland, Arkansas, and North Carolina are also continuously producing impressive numbers: 1,706 decisions with an 86% approval rate in Maryland, 1,238 decisions with an 83% approval rate in Arkansas, and 3,112 decisions with a 76% 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 4,802 approvals! These states also had over 2,000 approvals.



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

## ☆ OVER 2,000 APPROVALS

Nine states have over **2,000 approvals**: Florida, Ohio, California, Pennsylvania, Georgia, Tennessee, North Carolina, Michigan, and Oregon.

## 🌟 TOP APPROVAL RATES

Our "Top Ten" criteria required that states had at least 350 cumulative decisions, approval rates at or above the national average in 2021, and at least 24 decisions in 2021 (2 per month). The average cumulative approval rate for these rock star states is 79%!

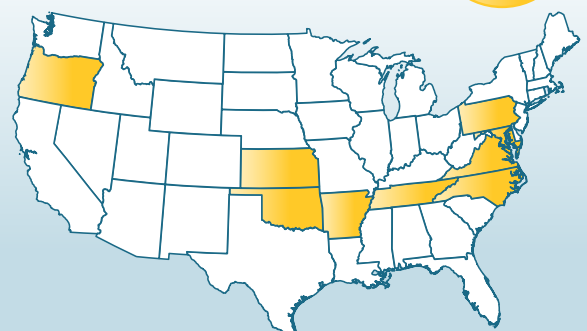
In order of highest average cumulative approval rate, the Top Ten states are: Pennsylvania, Tennessee, Maryland, Arkansas, North Carolina, Oklahoma, Virginia, Washington, DC, Oregon, and Kansas. We are proud to welcome Kansas and Washington, DC, into the "Top Ten" this year!

### TOP 10 STATES

- |                |                |
|----------------|----------------|
| Pennsylvania   | Oklahoma       |
| Tennessee      | Virginia       |
| Maryland       | Washington, DC |
| Arkansas       | Oregon         |
| North Carolina | Kansas         |

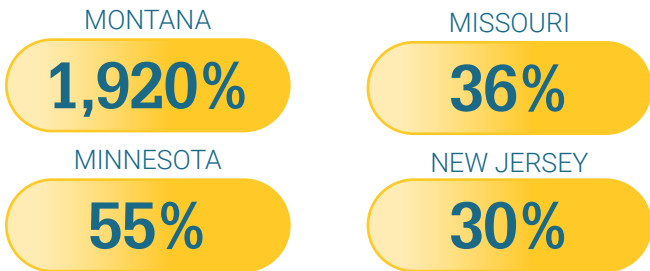
79%

APPROVAL RATE



## ||| MOST IMPROVED CAPACITY

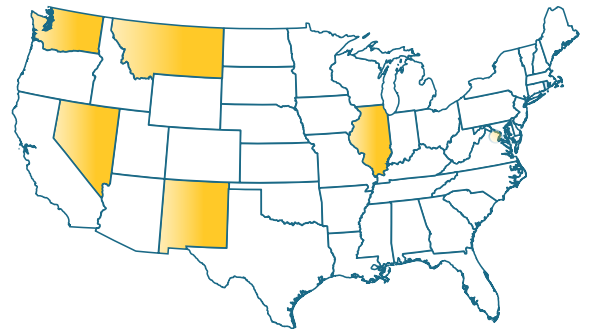
### PERCENT INCREASE IN APPLICATIONS



Montana, Minnesota, Missouri, and New Jersey showed great improvement in total decisions in 2021 compared to the previous year. Montana went from 5 decisions in 2020 to 101 decisions in 2021, a 1920 percent increase! Minnesota saw a 55 percent increase in applications, Missouri a 36 percent increase, and New Jersey a 30 percent increase.

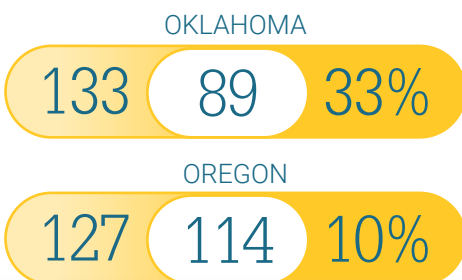
## ☰ MOST IMPROVED APPROVAL RATES

Washington, Montana, Washington, DC, Illinois, New Mexico, and Nevada showed the most improvement in their approval rates from 2020 to 2021! On average, these 6 states had a 32% increase in their approval rates.



## 📅 MOST IMPROVED DAYS TO DECISION

2020 DAYS TO DECISION	2021 DAYS TO DECISION	PERCENT DECREASE
-----------------------	-----------------------	------------------



Two states showed great reductions in their average days to decision. Oklahoma went from an average of 133 days to decision in 2020 to an average of 89 days in 2021, a 33% reduction. Oregon dropped from an average of 127 days to decision in 2020 to 114 days in 2021, a 10% reduction.

## ⚙️ CUMULATIVE OUTCOMES

**65%**

CUMULATIVE INITIAL APPROVAL RATE

**50,957**

CUMULATIVE INITIAL APPROVALS

**8,196**

CUMULATIVE APPEAL APPROVALS

**59,153**

PEOPLE RECEIVING BENEFITS BECAUSE OF SOAR

# 2021 OUTCOMES

Of the applications assisted using SOAR, **65 percent**, representing 50,957 persons have been approved for SSI/SSDI upon *initial* application since SOAR began (Table 1).<sup>2</sup>

An additional 8,196 persons, whose applications were denied initially, were

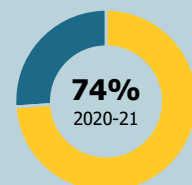
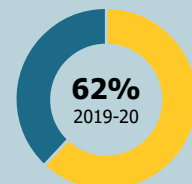
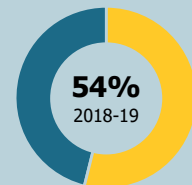
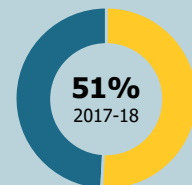
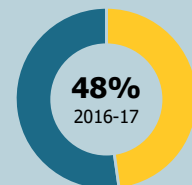
approved on reconsideration or at an Administrative Law Judge (ALJ) Hearing (Table 2). Taken together, **since 2006, the SOAR approach is responsible for assisting 59,153 persons who were experiencing or at risk of homelessness to access Social Security disability income benefits.**

## Community Spotlight: Success in Kansas

The SAMHSA SOAR TA Center is proud to highlight the fantastic progress made by SOAR caseworkers, Local Leads, and the State Team Lead in Kansas! In outcomes reporting for fiscal year 2021, the SOAR leadership team in Kansas implemented some creative and effective strategies for improving state outcomes. This initiative led to obtaining a 74% approval rate on initial applications in 2021, a 21% increase over the prior year!

- These changes began when state leads presented and sought feedback at the Kansas State Behavioral Health Conference in September 2020. The leadership team presented the importance of SOAR, gained an understanding of the needs around the state, and determine which agencies were open to filling SOAR caseworker positions.
- To support Local Leads and caseworkers, state leadership started using Basecamp, a 24/7 planning platform that allows anyone across the state to ask questions and get answers from peers, Local Leads, the State Lead, and the SAMHSA SOAR TA Center Liaison. This offers a personal level of assistance and has aided in building a state team approach.
- Local Leads host quarterly statewide meetings to provide targeted trainings. Meetings cover all aspects of the SOAR process and include Q&A sessions and guest speakers from SSA and DDS partners.
- With these combined strategies, Kansas providers were able to drastically improve outcomes without reducing the volume of applicants served.

### See How Kansas's Approval Rates Have Grown!



In 2021, there were 3,206 approvals on initial applications. **Decisions on SOAR initial applications were received in an average of 155 days in 2021 with an allowance rate of 60 percent.** This compares to the initial allowance rate of 30.8 percent for all

persons aged 18-64 who applied for SSI or SSDI in FY2019.<sup>3</sup>

We estimate that in 2021 alone, SSI/SSDI benefits for individuals served by SOAR brought over \$564 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 Administrative Law Judge (ALJ) hearings. In 2021, 1,485 SOAR-assisted decisions were rendered at the appeals level, with 50 percent of all reconsiderations or ALJ hearings resulting in an allowance (see Table 2). SOAR-assisted appeals take an average of 253 days, as compared to the national average hearing office processing time

of 330 days, resulting in applicants receiving lifesaving benefits significantly faster.<sup>4</sup> For those states that track their outcomes in OAT, we can report on Reconsiderations and ALJ hearings separately. In 2021, there were 228 reconsiderations approved with a 38 percent approval rate in an average of 141 days. SOAR programs assisting at the ALJ hearing level were very successful with a 67 percent approval rate on 159 hearings in an average of 280 days.

## IMPACT OF COVID-19

Amid the 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 submission of SSI/SSDI application packets, SOAR practitioners got creative. The SAMHSA SOAR TA Center asked SOAR State and Local Leads about the impact COVID-19 had on their SOAR programs. Fourteen 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.
  - Seventy-nine percent said that providers continued to provide services with physical distancing precautions
  - Thirty-five percent successfully used telehealth for evaluations or on-going treatment





“SOAR case managers have shown a great commitment to SOAR and have sought innovative ways to make sure cases could still be submitted. Some have worked in person throughout the pandemic and others have found ways to use technology to undertake assessments and implement the SOAR critical components. We are very proud of the work of our SOAR community during this very challenging year.”

–**Caroline Bolas**, SOAR State Team Lead, Maryland Department of Health Behavioral Health Administration

- Fifty percent established workarounds with SSA to continue submitting applications
- **Nebraska:** SOAR practitioners continued to work with their caseload and accept new clients. They found ways to work through the application process by meeting clients in libraries and parks when their offices were closed, utilizing video calling platforms, and connecting with client family members via phone. Further, Disability Determination Services (DDS) attended statewide monthly meetings to address questions and provide updates.
- **Michigan:** SOAR-assisted claims continued to be completed by practitioners despite various obstacles associated with the pandemic. Street Outreach teams continued to prioritize SOAR activities and found creative ways to maintain contact with clients.
- **Maryland:** Relationships and communication with SSA and DDS continued to be very positive and they have remained committed to SOAR. SSA/DDS have attended virtual meetings with SOAR specialists and leads to discuss concerns and identify solutions; helped to devise and refine alternative processes; and continued

to ensure SOAR cases are adjudicated in a timely manner.

- **Minnesota:** SSA kept up communication, providing updates and helping to troubleshoot issues. Due to SSA field offices being closed, more staff were available via phone reducing call wait times.
- **Virginia:** Like many states, Virginia saw a significant turnover in seasoned SOAR-trained case workers, whether due to COVID illness or apprehension about continuing direct service work. Despite this challenge, the state offered support to organizations as they on boarded new staff and continued to support them as they began completing SOAR assisted applications.

## Challenges

- The COVID-19 pandemic also posed some significant challenges for SOAR providers. Of the 14 SOAR leaders that responded to the survey:
  - Seventy-nine percent shared that providers could only provide virtual services
  - Seventy-one percent shared that providers paused or discontinued services

- Fifty percent had difficulty arranging needed evaluations for applicants
- Sixty-one percent shared that consultative exams were canceled or postponed
- Fifty percent did not have access to mail or files in their offices
- Sixty-four percent reported that communication was delayed or more difficult with SSA and 51 percent reported the same for DDS because of the in-person office closures
- Eighty-five 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.

- Many medical offices remained closed, causing delays in 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.

## FUNDING AND SUSTAINABILITY

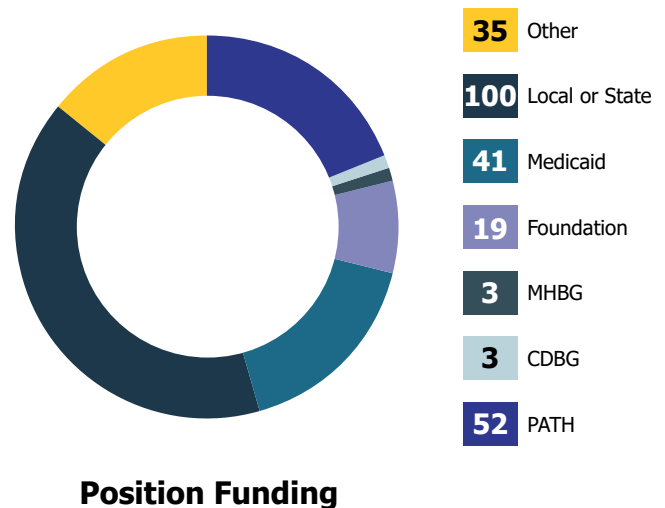
In 2021, 18 states reported that they were successful in securing NEW funding for their SOAR programs. Funding for SOAR programs continues to grow with diverse funding streams.

- Nationwide there are **248 full-time and 60 part-time SOAR-dedicated positions**.
- The average salary for dedicated SOAR benefits specialists as reported by 11 states was \$41,720/year.
- Salary ranges for SOAR staff ranged from \$28,000 to \$50,000, depending on local cost of living and staff expertise.
- Funding for SOAR positions came from federal programs, such as Projects for Assistance in Transition from Homelessness (PATH), Community Development Block Grant (CDBG), Mental Health Block Grant

(MHBG), Supportive Services for Veteran Families, and Medicaid; as well as state and local funds and foundation funding.

- Securing funding for dedicated positions remains a priority. States reported that it took on average 39 hours of staff time to complete each SSI/SSDI application.

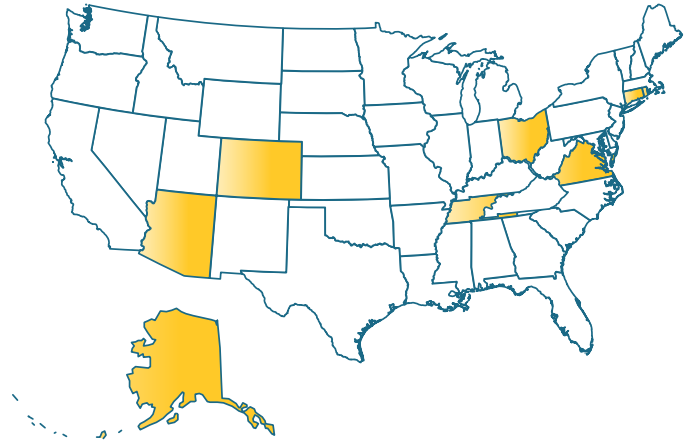
Figure 1. SOAR-Dedicated Position Funding



# SPOTLIGHT ON FUNDING: SOAR EXPANSION

- **Alaska:** Disability Law Center of Alaska in Juneau acquired new funding from the Juneau Community Foundation along with the Alaska Mental Health Trust to continue funding their full-time SOAR advocate.
- **Arizona:** Arizona established a core group of State Agency Stakeholders especially with their Medicaid partners from AHCCCS Employment, Housing, and Integrated Health Care. AHCCCS (Arizona's Medicaid program) has a specific billing code for SOAR assistance in order to provide this service at the agency level to members enrolled for Medicaid Services. Old Pueblo Community Services in Tucson hired a full-time dedicated SOAR benefits specialist.
- **Colorado:** The SOAR initiative was able to successfully advocate for the state to fund the Aid to the Needy Disabled (AND) bill which would result in funding for additional SOAR advocates throughout the state.
- **Connecticut:** The state chose to use a portion of their SAMHSA COVID Block Grant funds to create positions for seven dedicated SOAR specialists that will be housed at agencies across the state.
- **Ohio:** With additional funding, the SOAR Ohio State Lead Agency was able to hire a statewide Director position. Additionally, the state secured new funding from the Ohio Developmental Disability Council.
- **Rhode Island:** Rhode Island secured the state's first SOAR dedicated funding stream through a 2-year initiative with the City of Providence.

Figure 2. SOAR Expansion Through Funding



- **Tennessee:** The Assertive Community Treatment (ACT) in Chattanooga funded a SOAR dedicated staff person. The City of Chattanooga funded a SOAR dedicated staff person through the Homeless Services Division of the Department of Economic and Community Development; the Department of Mental Health and Substance Abuse Services funded a part-time SOAR Liaison to serve Moccasin Bend Mental Health Institute with state funding; and Tennessee Homeless Solutions is now using ESG funding to fund a part-time SOAR position.
- **Virginia:** Virginia expanded the use of SOAR statewide to include state funded permanent supportive housing, PATH programs, state hospitals, a pilot project for Forensic Discharge programs (which include local/regional jail discharge planners), and the pregnant/parenting woman Permanent Supportive Housing (PSH) program.

# IMPLEMENTATION OF CRITICAL COMPONENTS

States with higher approval rates credit their success to their capacity for implementing SOAR critical components 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 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. Implementing the 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-five percent of applications were submitted with medical records and 59 percent were submitted with a Medical Summary Report.
- **Fewer consultative exams.** Only 24 percent of applications required a consultative examination.

## 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-two states reported collaborations to serve Veterans in their SOAR programs.

- Two hundred sixty-eight Veterans were assisted with their applications using SOAR in FY2021.

### 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 271 young people ages 18-24 to apply for SSA disability benefits in 2021.

## Spotlight on Consistency and Capacity: Florida

Cumulatively, Florida has submitted 7,634 SOAR-assisted initial applications with an average approval rate of 63 percent. Specifically, the South Florida region has made a concerted effort to increase the number of SOAR-assisted applications and improve approval rates by ensuring that SOAR-trained providers have access to ongoing support and training.

The Florida Department of Children and Families regional Office of Substance Abuse and Mental Health has worked diligently with Miami-Dade and Monroe's Managing Entity (ME), Thriving Mind of South Florida, to identify and address challenges that have been reported by providers over the years. These barriers have ranged from limited staff time due to other job functions, to obtaining immigration documents and medical records in a timely manner, to differing SOAR processes across Miami-Dade County SSA Field Offices. These, and a variety of other challenges that seemed to have little to no resolve despite efforts made by all.

In 2020, the ME modified provider contracts to closely monitor providers' outcomes and hired a Regional Local Lead who was well versed in the SOAR model. This SOAR Leader has focused on providing quarterly in-person (remote during pandemic) SOAR Online Course Review Sessions and monitoring provider progress via OAT and in contract deliverables set for providers. The ME Local Lead consistently provides technical assistance to SOAR processors, works closely with newly trained SOAR processors, assists in navigating SOAR staff through the application process, and reviews disability documents to ensure quality. In his first full year in this role, application approval rates have increased from 39 to 52 percent. The ME Local Lead works to ensure that providers have the tools and knowledge needed to overcome hurdles as well as having necessary contacts to escalate complicated situations to leadership at SSA and DDS.

### 2021 FLORIDA OUTCOMES

**7,634**  
SOAR-ASSISTED  
INITIAL APPLICATIONS

**63%**  
AVERAGE  
APPROVAL RATE

### MIAMI-DADE COUNTY APPROVAL RATES

**39%**  
2020 APPROVAL RATE

**52%**  
2021 APPROVAL RATE

These initial applications were decided with a **64 percent approval rate** in an average of 148 days. Cumulatively, SOAR programs have served 2,946 young people with a 69 percent approval rate in 101 days.



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

## Spotlight on SOAR for American Indians and Alaska Natives: Minnesota

In 2021, the Minnesota Department of Human Services' (DHS) Social Security Advocacy and SOAR team, with the assistance of Minnesota's DDS, offered a special joint training that was designed specifically for people working with Native Communities in Minnesota. The training focused on the nuances of working with Native applicants, as well as how the SOAR process works in Minnesota. In addition to reviewing the process and forms, the training also addressed substance use and how DDS evaluates the issue of materiality. DDS continues its unique partnership with the Red Lake Nation by contracting with medical examiners to provide consultative exams (CEs) on the Red Lake Reservation as opposed to applicants needing to travel over an hour to the nearest exam facility.

developed a number of tools and resources for providers working with children and youth including the SOAR Online Course: Child Curriculum.

- Providers that have been implementing SOAR with children and tracking their outcomes in OAT have cumulatively

received **650 decisions** on child SSI applications with a **72 percent approval rate** in an average of 113 days to decision. In FY2021, they received 58 decisions with a 71 percent approval rate in an average of 175 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. Sixteen states reported collaborations with employment and/or work incentive programs.

For example, the Oklahoma Department of Mental Health and Substance Abuse Services contracts with Individual Placement and Support (IPS) providers assisting with SSI/SSDI applications. Employment tracking is still new for SOAR programs, but of the 32 communities that reported, 154 people were working at the time of their SSI/SSDI application and reported total additional earnings of \$133,761 or an average of \$868.58 per applicant.

## Success Story: Walking a Mile in Her Shoes

Sometimes, we can become so consumed with the rules, the regulations, the process and the forms of our SOAR work, that we forget that underneath it all is a human being. Where a child's claim is concerned, it is not just one person. There's a parent, grandparent, or care giver as well.

During this past year, I worked with the mother of a disabled son on his SSI claim. The facts are these. Her son is 11 years old. At age 9 he was diagnosed with attention deficit hyperactivity disorder (ADHD), specific learning disorders with impairment in reading and mathematics and a speech-sound disorder. Since kindergarten, my young client has had difficulty with social and emotional skills involving self-control, respecting authority as well as working and playing cooperatively. He has been treated for problems with anger, defiance, and aggression. His abilities to listen, work independently, organize his space and materials, and participate have been areas of concern in school. Receiving special education, since the first grade, my young client has also had special transportation to and from school due to his fine motor skill needs.

In working with the mother of this boy, I learned to walk in her shoes. I learned that being the parent of a child with a disability can be a challenge, and often those challenges feel like a flash flood. The love of this mother for her son compelled her to stand strong against the rushing waters: the stares, the school system, the medical bills, the ignorance from other people, the judgments, the insults when others hint that they could do better, the lack of support. She often wondered, could I do more? Could I try harder? Am I really doing all I can do? Sometimes, she had an overwhelming feeling of failing at everything she did because she did not have enough time or energy to do it all. She felt like she was failing her other children, failing at her marriage, failing at keeping a neat home. She also expressed how hard it was when she couldn't understand her son because of his speech-sound disorder. How frustrating it was when she couldn't have a conversation with her own child. Walking in her shoes, I also learned how courageous, funny, compassionate, resilient, brave, flexible, forgiving, generous, and full of love she was.

As we fulfill our duties as SOAR case managers, I think it is important that we remember that our work is about people, not forms. There is an Indigenous saying that to understand another, we must first walk a mile in their moccasins. Often attributed to various indigenous tribes, this saying comes from a poem written by Mary T. Lathrap in 1895. The original title of the poem was "Judge Softly." I leave you with the last lines of the poem "*Remember to walk a mile in his [her/their] moccasins. And remember the lessons of humanity taught to you by your elders. We will be known forever by the tracks we leave in other people's lives, our kindness and generosity. Take the time to walk a mile in his [her/their] moccasins.*"

—**Jon Katherine Martins**, SOAR Practitioner, Local Lead, Minnesota

## Spotlight on SSA and DDS Collaborations: Michigan

SOAR-trained case workers in Michigan continue to benefit from their ongoing partnerships with SSA and DDS. SSA and DDS representatives attend all Statewide SOAR Steering Committee meetings at which they provide input and guidance on completing SOAR-assisted claims. The SSA Public Relations Specialist is also available to check the state of individual claims, help providers connect with the SSA claims representative assigned to the case, and resolve barriers if and when they emerge.

The District Managers with DDS are also very responsive to questions regarding submitting medical evidence, communicating with the adjudicator assigned to the case, and scheduling consultative examinations. SSA and DDS collaborate to provide bi-monthly teaching sessions during the Statewide SOAR Partner check-in calls; topics have included tips and best practices for writing the Medical Summary Report, the most efficient way to submit medical evidence, and a review of how DDS evaluates claims.

## 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. In North Carolina, SOAR is currently funded through 10 different Medicaid billing sources, including 6 hospital systems in the state. In Virginia, the Department of Behavioral Health and Developmental Services has funded 8

positions in the state psychiatric facilities and is slated to add an additional 3-4 staff positions in the upcoming year. Collaborations with hospitals were reported by 29 states, including:

- 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

One SOAR provider at Atrium Health in Charlotte, North Carolina assisted 6 individuals with obtaining SSI benefits which facilitated Medicaid reimbursements for their hospital of \$3,298,157.



## 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 20 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 FY2021, the reported 70 applicants who were residing in a jail or correctional facility at the time of their application had a 76 percent approval rate in an average of 123 days. Cumulatively, 573 individuals have been assisted with a pre-release application. Of those, 72 percent were approved in an average of 93 days.

## Projects for Assistance in Transition from Homelessness

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

## Spotlight on Pre-Release Discharge Planners: Virginia

In FY2021 Virginia expanded the SOAR initiative to state hospitals and created a pilot for SOAR to be used among Forensic Discharge Programs working in the local and regional jails. This expansion required additional collaborating and planning with SSA and DDS, and with their support Virginia began utilizing a formalized pre-release process for all SOAR applications coming from the state's nine psychiatric hospitals. Through this pre-release process, the state operationalized a complementary process through DSS for Medicaid, Long-Term Care, and Auxiliary Grant applications for applicants.

The state has applied for a data-sharing agreement with SSA that allows state programs to directly access information such as past benefit awards, current benefit amount, and information about when benefits started and were discontinued. This will greatly reduce the workload for both SOAR-trained case workers and local SSA offices, and will allow for a much smoother process for those exiting institutional care.

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. All fifty states report collaboration with the SAMHSA PATH program, including:

- Dedicated benefits specialists on PATH teams (50 full-time, 9 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 2021, nine states reported \$3,577,650 in Medicaid reimbursement for 93 individuals, or an average of \$38,469 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. Three states reported receiving \$10,673 in Medicare reimbursement this year for four 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. Eight states reported a total General Assistance reimbursement of \$243,169 for 84 individuals, an average of \$2,895 per person.



**In 2021, 9 states reported \$3,577,650 in Medicaid reimbursement or an average of \$38,469 per person, as a result of SOAR.**



“Even through the COVID-19 pandemic, it was possible to partner with people and complete the SOAR process. Working remotely, we developed new ways to engage with clients, get necessary paperwork signed and gather information for Medical Summary Reports. We participated in SOARing Over Lunch, metro group for SOAR providers, and TA meetings which have been wonderful resources in learning how best to complete some of the detailed steps in the SOAR process.”

–**Angie Owens and Barb Wachman**, Carver County Health and Human Services, Minnesota

## DIVERSITY, EQUITY, AND INCLUSION

SOAR initiatives across the country are working to reduce the influence of implicit bias and to encourage diversity, equity, and inclusion (DEI) during the process of identifying potential applicants to assist using SOAR. Organizations are making the effort to consider how an applicant’s racial, ethnic, and cultural views regarding disabilities, diagnoses, symptoms, and treatment, as well as their socioeconomic and homelessness status may factor into a caseworker’s decision to assist them.

In addition, SOAR Leaders and agency supervisors are working to strengthen staff engagement practices. These practices improve staff relationships, enhance workplace wellness, address workplace inequity, and establish a foundation of safe places within the workplace. These benefits are extended to

the people they serve. For resources to further your learning and understanding, please visit the [Improving Staff Engagement](#) page on the SOARWorks website.

### Minnesota

Minnesota aims to achieve equity and inclusion in their SOAR programming through analyzing data. SOAR leads analyze not only the race and ethnicity of SOAR participants but also where they are located, any tribal affiliations, and living arrangements. Additionally, the state solicits regular feedback from SOAR-trained case workers and the applicants they serve, as well as state, county, and tribal agencies to ensure qualitative information accompanies the data.



## Ohio

SOAR Ohio has presented and promoted the new SOAR DEI tools statewide during the Ohio certification training. Additionally, SOAR Ohio promotes and encourages DEI through its hiring practices by intentionally seeking out diverse candidates with lived experience related to the mission of SOAR Ohio and the entire Coalition on Homelessness and Housing in Ohio (COHHIO) team.



## Oregon

Kas Causeya, Program Manager with the BEST initiative at Central City Concern in Portland, Oregon works with SOAR-trained case workers individually to address issues around diversity, inclusion, and ensuring that BEST's services are equitable and able to tell the applicant's story effectively.

## ENDNOTES

- 1 To be considered for inclusion in the Super Stars rankings the state must have had at least 24 decisions in 2021 and have an approval rate at or above the national average for 2021. Cumulative outcomes include outcomes from 2009 to the current fiscal year.
- 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 SSI Annual Statistical Report, 2019. Table 70. SSA Pub. No. 13-11827. Washington, D.C.: SSA, August 2020
- 4 Hearing Office Average Processing Time Ranking Report FY 2021 (For Reporting Purposes: 9/26/2020 through 09/24/2021) ([https://www.ssa.gov/appeals/DataSets/05\\_Average\\_Processing\\_Time\\_Report.html](https://www.ssa.gov/appeals/DataSets/05_Average_Processing_Time_Report.html))

**TABLE 1. 2021 SOAR-ASSISTED INITIAL APPLICATION OUTCOMES**

State	2021 Decisions	2021 Approvals	2021 Allowance	2021 Average Days	2021 Cumulative Decisions	2021 Cumulative Approvals	2021 Cumulative Allowance Rate
Alabama	11	6	55%	148	246	173	70%
Alaska	16	10	63%	219	177	104	59%
Arizona	19	11	58%	89	388	246	63%
Arkansas	30	27	90%	80	1238	1032	83%
California	882	393	45%	163	6695	3692	55%
Colorado	44	16	36%	196	1211	690	57%
Connecticut	14	6	43%	180	453	284	63%
Delaware	1	1	100%	84	336	229	68%
District of Columbia	24	20	83%	195	632	436	69%
Florida	718	384	53%	135	7634	4802	63%
Georgia	179	130	73%	230	4341	2917	67%
Hawaii	9	3	33%	89	41	29	71%
Idaho	5	4	80%	98	265	152	57%
Illinois	62	32	52%	183	613	358	58%
Indiana	17	6	35%	161	119	62	52%
Iowa	28	19	68%	109	221	138	62%
Kansas	121	90	74%	160	1658	1125	68%
Kentucky	15	11	73%	178	928	596	64%
Louisiana	22	13	59%	185	431	290	67%
Maine	0	0	N/A	N/A	13	10	77%
Maryland	175	151	86%	93	1706	1467	86%
Massachusetts	10	7	70%	129	811	469	58%
Michigan	116	80	69%	138	3553	2246	63%
Minnesota	337	130	39%	205	3070	1846	60%
Mississippi	10	5	50%	149	288	172	60%
Missouri	68	43	63%	135	395	239	61%
Montana	101	64	63%	84	327	179	55%
Nebraska	270	162	60%	157	2429	1379	57%
Nevada	101	77	76%	201	1038	696	67%
New Hampshire	0	0	N/A	N/A	8	6	75%
New Jersey	30	20	67%	240	643	410	64%
New Mexico	38	25	66%	128	958	648	68%
New York	37	19	51%	175	2412	1423	59%
North Carolina	186	114	61%	427	3112	2358	76%
North Dakota	0	0	N/A	N/A	9	7	78%
Ohio	144	84	58%	103	7527	3850	51%
Oklahoma	209	147	70%	89	2175	1593	73%
Oregon	218	151	69%	114	3166	2173	69%
Pennsylvania	347	295	85%	100	4021	3637	90%
Rhode Island	6	3	50%	127	291	218	75%
South Carolina	66	47	71%	123	516	345	67%
South Dakota	4	4	100%	271	166	134	81%
Tennessee	176	155	88%	111	2655	2389	90%
Texas	150	62	41%	156	1580	757	48%
Utah	0	0	N/A	N/A	3897	1862	48%
Vermont	2	2	100%	258	26	16	62%
Virginia	155	109	70%	120	2147	1544	72%
Washington	35	19	54%	193	524	371	71%
West Virginia	1	0	0%	321	122	89	73%
Wisconsin	111	44	40%	183	1413	845	60%
Wyoming	10	5	50%	200	309	224	72%
<b>Totals</b>	<b>5,330</b>	<b>3,206</b>	<b>60%</b>	<b>155</b>	<b>78,934</b>	<b>50,957</b>	<b>65%</b>

**TABLE 2. 2021 SOAR ASSISTED APPEALS COMBINED**

State	2021 Appeals Decisions	2021 Appeals Approvals	2021 Appeals Allowance	2021 Appeals Average Days	2021 Cumulative Decisions	2021 Cumulative Approvals	2021 Cumulative Allowance Rate
Alabama	2	1	N/A	55	24	19	79%
Alaska	1	0	0%	0	24	8	33%
Arizona	5	2	40%	161	83	43	52%
Arkansas	0	0	N/A	N/A	313	246	79%
California	383	263	69%	402	1216	698	57%
Colorado	11	6	55%	307	135	102	76%
Connecticut	9	4	44%	372	146	61	42%
Delaware	0	0	N/A	N/A	5	3	60%
District of Columbia	6	4	67%	283	157	80	51%
Florida	191	82	43%	156	1442	694	48%
Georgia	31	22	71%	262	860	437	51%
Hawaii	1	1	100%	197	6	6	100%
Idaho	1	1	100%	517	102	37	36%
Illinois	34	11	32%	201	187	78	42%
Indiana	6	0	0%	157	40	14	35%
Iowa	8	6	75%	190	108	56	52%
Kansas	26	9	35%	136	450	242	54%
Kentucky	1	1	100%	370	246	140	57%
Louisiana	15	6	40%	272	159	97	61%
Maine	0	0	N/A	N/A	1	1	100%
Maryland	17	13	76%	185	314	241	77%
Massachusetts	4	2	50%	150	77	40	52%
Michigan	23	11	48%	153	766	521	68%
Minnesota	212	45	21%	240	1020	363	36%
Mississippi	4	2	50%	92	23	10	43%
Missouri	6	4	67%	75	43	30	70%
Montana	7	7	100%	215	75	45	60%
Nebraska	47	17	36%	109	758	280	37%
Nevada	14	10	71%	256	338	208	62%
New Hampshire	0	0	N/A	N/A	0	0	N/A
New Jersey	9	7	78%	254	237	158	67%
New Mexico	11	5	45%	195	246	153	62%
New York	9	4	44%	257	578	318	55%
North Carolina	55	27	49%	284	819	546	67%
North Dakota	0	0	N/A	N/A	1	1	100%
Ohio	18	6	33%	112	213	67	31%
Oklahoma	32	23	72%	133	144	106	74%
Oregon	94	50	53%	286	1122	512	46%
Pennsylvania	23	5	22%	146	190	90	47%
Rhode Island	3	2	67%	104	186	111	60%
South Carolina	11	6	55%	65	114	55	48%
South Dakota	0	0	N/A	N/A	18	14	78%
Tennessee	7	5	71%	217	109	69	63%
Texas	46	18	39%	165	471	162	34%
Utah	0	0	N/A	N/A	1618	509	31%
Vermont	1	1	100%	35	8	4	50%
Virginia	35	20	57%	168	475	279	59%
Washington	8	4	50%	177	34	12	35%
West Virginia	0	0	N/A	N/A	86	25	29%
Wisconsin	56	23	41%	188	417	196	47%
Wyoming	2	1	50%	182	28	9	32%
<b>Totals</b>	<b>1,485</b>	<b>737</b>	<b>50%</b>	<b>253</b>	<b>16,232</b>	<b>8196</b>	<b>50%</b>

**TABLE 3. 2021 SOAR-ASSISTED RECONSIDERATIONS**

State	2021 Reconsideration Decisions	2021 Reconsideration Approvals	2021 Reconsideration Allowance Rate	2021 Reconsideration Average Days
Alabama	2	1	50%	55
Alaska	1	0	0%	N/A
Arizona	4	1	25%	142
Arkansas	0	0	N/A	N/A
California	35	6	17%	87
Colorado	8	3	38%	274
Connecticut	9	4	44%	372
Delaware	0	0	N/A	N/A
District of Columbia	2	0	0%	250
Florida	146	52	36%	140
Georgia	22	15	68%	186
Hawaii	1	1	100%	197
Idaho	0	0	N/A	N/A
Illinois	25	4	16%	180
Indiana	6	0	0%	157
Iowa	4	2	50%	141
Kansas	26	9	35%	136
Kentucky	0	0	N/A	N/A
Louisiana	11	3	27%	247
Maine	0	0	N/A	N/A
Maryland	15	11	73%	129
Massachusetts	4	2	50%	150
Michigan	19	9	47%	110
Minnesota	1	0	0%	72
Mississippi	3	1	33%	21
Missouri	6	4	67%	75
Montana	3	3	100%	105
Nebraska	47	17	36%	109
Nevada	11	7	64%	206
New Hampshire	0	0	N/A	N/A
New Jersey	3	2	67%	86
New Mexico	5	2	40%	108
New York	7	2	29%	76
North Carolina	4	3	75%	232
North Dakota	0	0	N/A	N/A
Ohio	15	3	20%	82
Oklahoma*	0	0	N/A	N/A
Oregon	0	0	N/A	N/A
Pennsylvania	23	5	22%	146
Rhode Island	2	1	50%	65
South Carolina	10	5	50%	72
South Dakota	0	0	N/A	N/A
Tennessee	7	5	71%	217
Texas	30	10	33%	114
Utah	0	0	N/A	N/A
Vermont	0	0	N/A	N/A
Virginia	29	17	59%	149
Washington	8	4	50%	177
West Virginia	0	0	N/A	N/A
Wisconsin	38	13	34%	137
Wyoming	2	1	50%	182
<b>Totals</b>	<b>594</b>	<b>228</b>	<b>38%</b>	<b>141</b>

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

**TABLE 4. 2021 SOAR-ASSISTED ALJ HEARINGS**

State	2021 ALJ Hearing Decisions	2021 ALJ Hearing Approvals	2021 ALJ Hearing Allowance Rate	2021 ALJ Hearing Average Days
Alabama	0	0	N/A	N/A
Alaska	0	0	N/A	N/A
Arizona	1	1	100%	241
Arkansas	0	0	N/A	N/A
California	9	3	33%	165
Colorado	3	3	100%	394
Connecticut	0	0	N/A	N/A
Delaware	0	0	N/A	N/A
District of Columbia	4	4	100%	299
Florida	45	30	67%	207
Georgia	9	7	78%	448
Hawaii	0	0	N/A	N/A
Idaho	1	1	100%	517
Illinois	9	7	78%	257
Indiana	0	0	N/A	N/A
Iowa	4	4	100%	240
Kansas	0	0	N/A	N/A
Kentucky	1	1	100%	370
Louisiana	4	3	75%	338
Maine	0	0	N/A	N/A
Maryland	2	2	100%	604
Massachusetts	0	0	N/A	N/A
Michigan	4	2	50%	358
Minnesota*	0	0	N/A	N/A
Mississippi	1	1	100%	306
Missouri	0	0	N/A	N/A
Montana	1	1	100%	98
Nebraska	0	0	N/A	N/A
Nevada	3	3	100%	439
New Hampshire	0	0	N/A	N/A
New Jersey	2	1	50%	506
New Mexico	6	3	50%	268
New York	2	2	100%	889
North Carolina	1	1	100%	386
North Dakota	0	0	N/A	N/A
Ohio	3	3	100%	262
Oklahoma*	0	0	N/A	N/A
Oregon	1	0	0%	286
Pennsylvania	0	0	N/A	N/A
Rhode Island	1	1	100%	183
South Carolina	1	1	100%	0
South Dakota	0	0	N/A	N/A
Tennessee	0	0	N/A	N/A
Texas	16	8	50%	262
Utah	0	0	N/A	N/A
Vermont	1	1	N/A	35
Virginia	6	3	50%	257
Washington	0	0	N/A	N/A
West Virginia	0	0	N/A	N/A
Wisconsin	18	10	56%	296
Wyoming	0	0	N/A	N/A
<b>Totals</b>	<b>159</b>	<b>107</b>	<b>67%</b>	<b>280</b>

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