Apollo Recovery Center

Payer Summary for Payer X





Helping treatment programs measure & improve their outcomes

For Patients in Treatment Between January 1, 2020 & December 31, 2023

TABLE OF CONTENTS

	<u>Page</u>
BACKGROUND	3
About Apollo Recovery Center	3
Research Design	3
Patient Overview	4
FINANCIAL METRICS	5
Readmission Rates	5
Length of Stay	5
Reduction in Expensive Medical Interventions	6
Estimated Savings for Payer X	6
TREATMENT EFFECTIVENESS	7
Abstinence One Year After Leaving Treatment	7
Reduction in Severity of Co-Occurring Disorders	8
Treatment Completion	9
Satisfaction During Treatment	10
Increase in Employment	10
Improvement in Social Determinants of Health	11
Health Risk Assessment Improvement	11
Importance of After-Care	12
HEDIS Measures	13
Access to Treatment	13
Depression Remission or Response	13

BACKGROUND

About Apollo Recovery Center

Apollo Recovery Center, LLC ("Apollo") is a hypothetical substance use disorder treatment program in Sacramento, California offering a continuum of care to adults. Most patients start in residential care and progress to partial hospitalization (PHP) and/or intensive outpatient (IOP).

This payer-specific outcomes report summarizes outcomes for 283 patients insured by Payer X who were treated at Apollo Recovery Center and discharged between January 1, 2020 and December 31, 2023.

This report was released on April 4, 2024.

Research Design

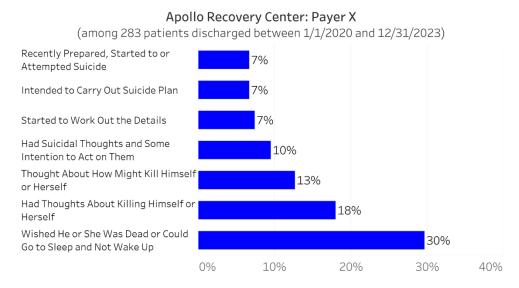
All patients participated in Vista's INSIGHT Addiction™ progress monitoring research in which they were screened for depression, anxiety, trauma, eating disorders, suicidal ideation, and self-harming behavior shortly after intake. Every week or two thereafter, their clinicians received reports tracking the severity of the symptoms of the various disorders they were struggling with, as well as the strength and frequency of any cravings they were feeling, their satisfaction with treatment, and the quality of their relationships with their closest family members.

Vista Research Group contacts all patients who spent at least seven days in treatment at one month, six months, and twelve months after treatment. Vista researchers make at least seven attempts to contact them at each time period via text, email, and phone. To encourage complete honesty, patients participating in the post-treatment research are promised confidentiality and only aggregated results are provided to Apollo.

Patient Overview

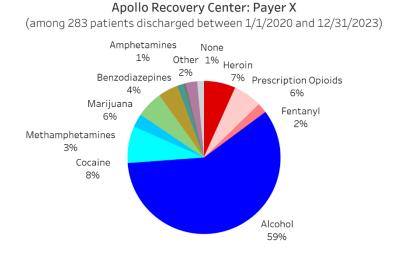
283 Payer X members attended Apollo between January 1, 2020 and December 31, 2023. When these patients started treatment, 60% reported moderate to severe levels of depression, 55% had moderate to severe levels of anxiety, and 54% had symptoms of probable to severe PTSD. Thirty percent (30%) reported having wished they were dead or "could go to sleep and not wake up" in the 30 days prior to starting treatment, and 7% had prepared, started to, or attempted suicide during this time:

Suicidal Thoughts and Intentions at Intake



The patients' primary drug of choice varied widely. Fifty-nine percent (59%) of the patients reported entering treatment for alcohol use disorder, 15% for opioid use disorder, and another 8% for cocaine use disorder:

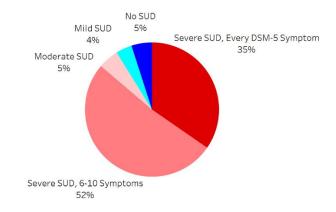
What is Your Primary Drug of Choice?



Thirty-five percent (35%) of the patients reported having experienced all 11 of the DSM-5 symptoms of substance use disorder in the year prior to entering treatment. In total, 87% met the criterion of having a severe substance use disorder:

Addiction Severity

Apollo Recovery Center: Payer X (among 283 patients discharged between 1/1/2020 and 12/31/2023)



FINANCIAL METRICS

Readmission Rates

Only 5% of Apollo's patients were readmitted to Apollo within 30 days of discharge and 8% within 90 days of discharge:

	Apollo	
	Payer X Patients	
	(n=283)	
	1/1/20-12/31/23	
Readmission within 30 days	5%	
Readmission within 90 days	8%	

Length of Stay

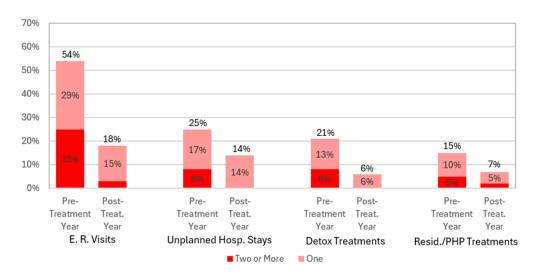
Payer X patients had a median length of stay of 59 days, which is substantially longer than the average stay for patients attending SUD centers in the Vista Research Network.

Reduction in Expensive Medical Interventions

Apollo patients who completed a twelve month post-treatment survey have had far fewer expensive medical interventions than would have been predicted based on their pre-treatment year. For example, 54% of patients had at least one emergency department visit in the year prior to treatment compared to only 18% in the post-treatment year:

Number of Expensive Medical Interventions

(one year pre-treatment vs. one year post-treatment among 72 patients completing entire 12-mo. survey)



Estimated Savings for Payer X

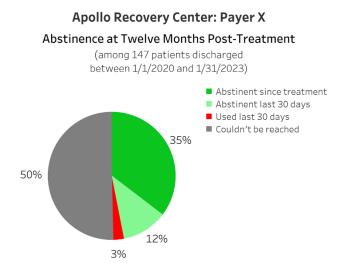
By combining the above information with an analysis of SUD-related hospitalizations in the 2021 NIS and NEDS databases, Vista estimates that Payer X saved \$17,634 per patient and \$1,270,000 overall in expensive medical interventions in the post-treatment year for the 72 patients submitting a 12-month survey:

		- Stilliatet	Aimad ou	vings for Payer X		
	No. of Medical Services				<u>Payer</u>	X Savings
	Pre- Treatment <u>Year</u>	Post- Treatment <u>Year</u>	Reduction	2021 Median Western Cost*	Annual Savings Per Respondent	Total Year 1 Savings for 72 Respondents
E. R. Visits	0.92	0.22	0.69	\$3,978	\$2,745	\$198,000
Unplanned Hosp. Stay	0.38	0.14	0.24	\$26,994	\$6,479	\$466,000
Detox Treatment	0.33	0.06	0.28	\$21,667	\$6,067	\$437,000
Residential Treatments**	0.23	0.10	0.13	\$18,750	<u>\$2,344</u>	\$169,000
TOTAL					\$17,634	\$1,270,000
* Median costs for E. R. \	/isits, Unpla	nned Hospit	al Stays and De	tox Treatments in the V	Vestern Region ha	ve been
calculated for hospital	services usi	ng the HCUF	r's 2021 NIS and	d NEDS databases		
** Estimated residential tr	eatment co	st is based o	n Apollo's curre	ent in-network payer agr	eement with Paye	r X allowing

TREATMENT EFFECTIVENESS

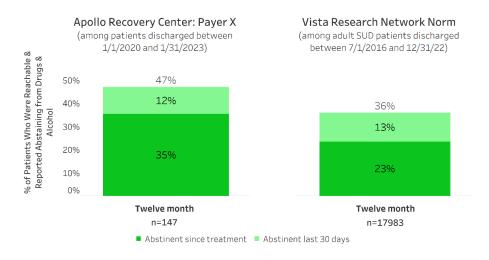
Abstinence One Year After Leaving Treatment

Among 147 patients discharged between January 1, 2020 and January 31, 2023, 47% were reachable at twelve months post-treatment and said they had abstained from all drugs or alcohol for at least the last 30 days. Another 3% reported having used drugs or alcohol within the last 30 days:



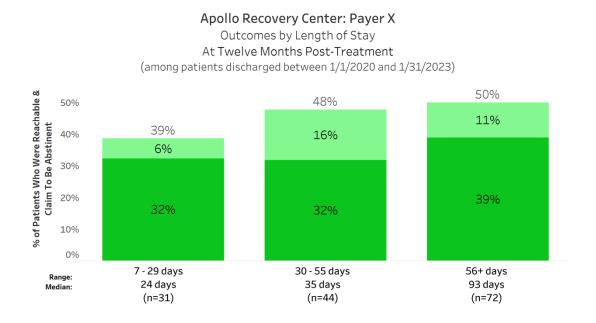
The 47% of Payer X members attending Apollo who reported being abstinent at twelve months post-treatment is much higher than the 36% Vista norm for SUD centers nationally:

Abstinence vs Vista Norms



It is important for context to note that Vista's norms are probably well above the average for the entire addiction treatment industry today. The reason for this is that the only treatment centers likely to make the significant investment in tracking their post-treatment outcomes are top-quality programs that are confident their outcomes are very good.

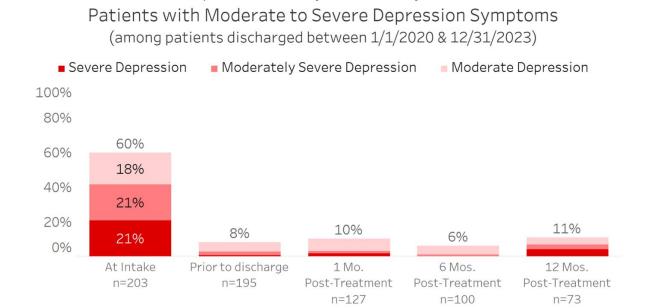
Fifty percent (50%) of Payer X members who attended Apollo for at least 56 days reported being abstinent at twelve months post-treatment compared to only 39% who were in treatment for 29 days or less:



Reduction in Severity of Co-Occurring Disorders

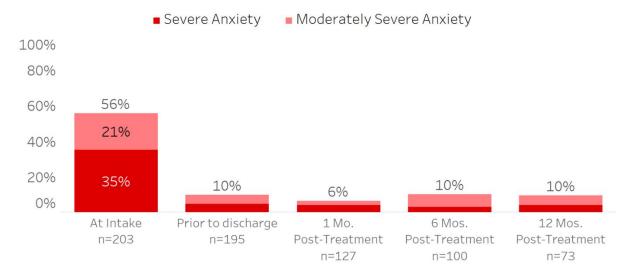
The percentage of patients reporting moderate to severe symptoms of both depression and anxiety decreased dramatically during treatment and remained low throughout the post-treatment year:

Apollo Recovery Center: Payer X



Apollo Recovery Center: Payer X Patients with Moderate to Severe Anxiety Symptoms

(among patients discharged between 1/1/2020 & 12/31/2023)



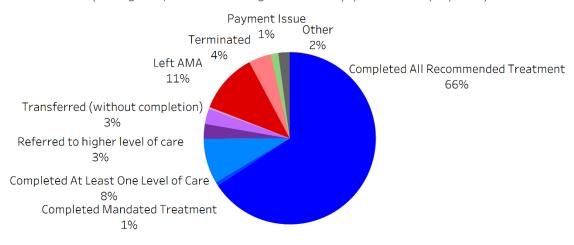
Treatment Completion

Among the 283 patients who discharged from treatment between January 1, 2020 and December 31, 2023, 66% completed all recommended treatment and another 8% completed at least one level of care:

Treatment Completion

Apollo Recovery Center: Payer X

(among 283 patients discharged between 1/1/2020 and 12/31/2023)

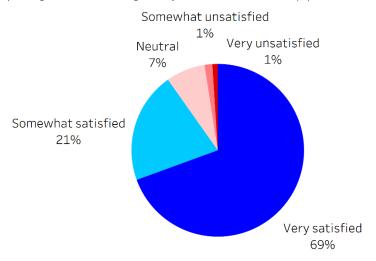


Satisfaction During Treatment

Payer X patients were asked to report their satisfaction with the treatment they were receiving on every update survey during treatment. Sixty-nine percent (69%) reported being very satisfied, and another 21% were somewhat satisfied with the treatment they were receiving:

Patient Satisfaction with Treatment Apollo Recovery Center: Payer X

(among 1,850 monitoring surveys submitted between 1/1/2020 and 12/31/2023)

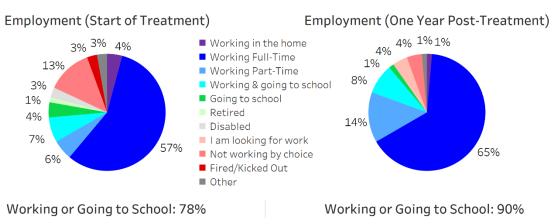


Increase in Employment

The percentage of patients who were working, going to school, or working in the home increased from 78% at intake to 90% one year after discharge among patients submitting the twelve month survey:

Impact of Treatment on Employment

Apollo Recovery Center: Payer X (among 72 patients completing entire 12-month survey)

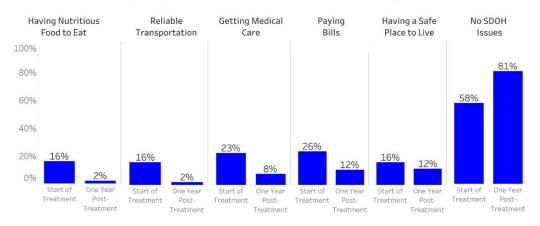


Improvement in Social Determinants of Health

There was a dramatic reduction in the numbers of patients experiencing difficulty with one or more social determinants of health between the start of treatment and one year post-discharge. In fact, the percentage of patients who were not experiencing difficulty with any key social determinants of health increased from 58% at the start of treatment to 81% one year post-discharge among patients submitting a twelve-month survey:

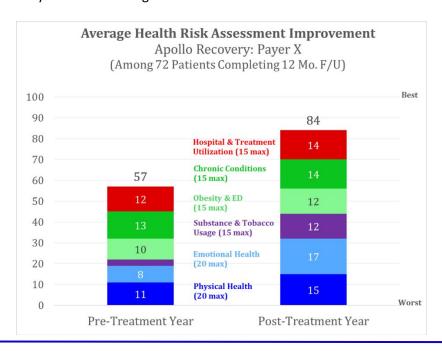
Experiencing Difficulty with Social Determinants of Health Apollo Recovery Center: Payer X

(among 72 patients completing entire 12-month survey)



Health Risk Assessment Improvement

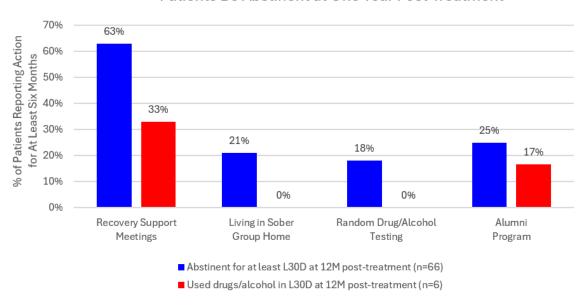
Vista calculates a Health Risk Assessment (HRA) score for patients based upon their physical and emotional health, their substance use, the existence of chronic conditions or weight- or food-related issues, and the patient's recent use of expensive medical services. Since a patient's HRA score is expected to be inversely correlated with the future cost of their medical care, it is excellent to see that the average HRA for patients who submitted a 12-month survey increased by 47% (from 57 to 84) between the start of treatment and one year after discharge:



Importance of After-Care

The after-care activities shown below appear to have helped Payer X patients remain abstinent. For example, 63% of the patients who were abstinent one year after discharge reported having participated in Recovery Support Meetings for at least their first six post-treatment months compared to only 33% of the patients who were using drugs or alcohol one year after treatment:

Actions Taken For At Least Six Months That Appear to Have Helped Patients Be Abstinent at One Year Post-Treatment



HEDIS MEASURES

Access to Treatment

Among the 283 Payer X members who attended Apollo between January 1, 2020 and December 31, 2023, 95% reported being able to start treatment at Apollo immediately upon making the decision to attend. Among Payer X members who were hospitalized or attended another SUD treatment immediately prior to Apollo, 100% and 97%, respectively, reported being able to enter Apollo right away:

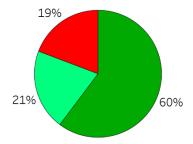
	(among patio	•	ecovery Center: F Access to Care rged between 1/1/2	•	1/2023)	
	Patients Hospitalized Immediate to treatment		, ,	or Attended Other Treatmer Immediately Prior to Treatn		
Number (% of all patients)	283 (100%)		36 (13%)		64 (23%)	
When able to enter Apoli	o Recovery treatmer	ıt after maki	ng decision to attend:			
	# of Patients	%	# of Patients	%	# of Patients	%
Right Away	268	95%	36	100%	62	97%
2 to 3 days	6	2%	0	0%	2	3%
4 to 6 days	1	0%	0	0%	0	0%
1 to 2 weeks	4	1%	0	0%	0	0%
3 to 4 weeks	2	1%	0	0%	0	0%
5 to 8 weeks	1	0%	0	0%	0	0%
Not sure	1	0%	0	0%	0	0%

Depression Remission or Response

Among the 283 Payer X members who attended Apollo between January 1, 2020 and December 31, 2023, 156 (55%) had a PHQ-9 score greater than 9 at intake and completed at least one progress survey while in treatment. Among these 156 patients reporting moderate to severe depression symptoms at intake, 60% reported that their depression was in remission (i.e., their PHQ-9 score was <5) on their last survey before discharge, and another 21% reported at least a 50% reduction in the severity of their depression symptoms:

Depression Improvement Prior to Discharge Apollo Recovery Center: Payer X

(among 156 patients with PHQ-9 > 9 at intake who submitted at least one update survey & discharged between 1/1/2020 & 12/31/2023)



- Remission: No depression on final survey
- Response: At least a 50% reduction in severity of depression symptoms
- Still reporting some depression on final survey