

PROVEN RESULTS

Understanding Outcomes-Driven, Comprehensive Addiction Treatment

Within communities, successful addiction treatment substantially reduces the demand on emergency medical services and healthcare organizations, while simultaneously decreasing the burden on local law enforcement, court systems, and jails.¹

Surprisingly, according to SAMHSA's most recent National Survey of Substance Abuse Treatment Services (N-SSATS), **only 10%** of addiction treatment provider facilities follow the scientific literature and have opioid treatment programs (OTP) on-site. Worse yet, **only 66%** of addiction treatment providers nationally accept Medicaid with **an abysmal 36%** taking Medicare.²

Patients with substance use disorder are overwhelming emergency departments, the justice system, and service agencies. States and counties are being forced to reallocate budgets in response. To break the cycle of addiction, patients must be directed to evidence-based treatment providers with proven, statistically valid outcomes. The personal, societal, and governmental costs of addiction are too high to rely on untested or outdated treatment methodologies.

Outcomes data gathered by best in class treatment provider BrightView replicates data from the National Institute on Drug Abuse.³ Headquartered in Cincinnati, BrightView is currently providing care to **more than 12,000 patients** throughout Ohio, Kentucky, Virginia and Delaware using a comprehensive harm-reductionist, biopsychosocial model of care.

BrightView collected and analyzed outcomes data from patients in its evidence-based substance use disorder care programs and found that treatment was found to decrease:

- Consumption of illicit substances and alcohol
- Anxiety and depressive disorders
- Emergency Department utilization
- Unemployment
- Length of incarceration
- New arrests/recidivism

Equally important, the positive results BrightView patients experience are maintained at a year of treatment and beyond. Ongoing care builds significantly on these initial improvements.

70%

*Decrease in
illicit substance
use*

50%

*Decrease
in alcohol
consumption*

50%

*Decrease
in patient
unemployment*

1/3

*Decrease in
ER visits*

70%

*Decrease in time
spent in jail*

Better Quality of Life

BrightView's outcomes analysis reveals dramatic, measurable improvement in people's lives, including substantial reductions in drug and alcohol use, unemployment, depression, and anxiety.

ILLICIT SUBSTANCE USE: DECREASED 70%

In the first **90 days** of treatment, BrightView patients decrease consumption of illicit substances by **an average of 70%**, with many patients achieving complete abstinence. **P-value less than 0.0001.** This outcome is one of the most important indicators of successful substance use disorder treatment.

ALCOHOL USE: DECREASED 50%

BrightView patients report **an average 50%** reduction in their alcohol consumption within the first **90 days** of treatment, with many achieving long-term abstinence. **P-value less than 0.0001.**

UNEMPLOYMENT: DECREASED 50%

Within **6 months** of initiating treatment at BrightView, unemployment among patients decreased by **more than 50%**. As part of the organization's commitment to helping patients achieve long-lasting recovery,

BrightView focuses on assisting patients in job-readiness training, resume-building, and connecting them with local social service organizations to help secure stable employment, housing, food allowances, and access to transportation.

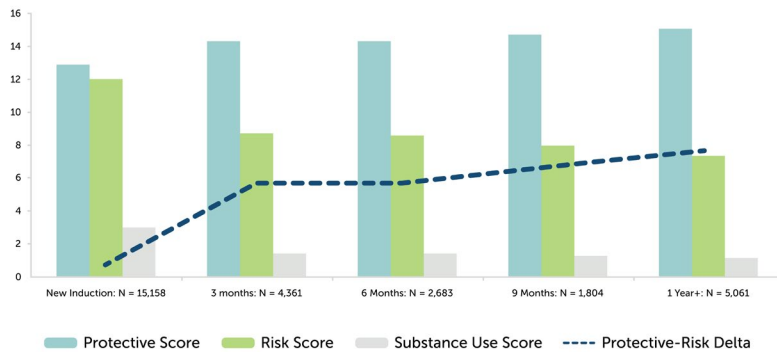
ANXIETY AND DEPRESSION: DECREASED

Mental health disorders such as depression and anxiety can contribute to SUD diagnoses and/or worsen symptoms of a pre-existing, co-occurring diagnosis. Based on the response measurements gathered from a standardized Patient Health Questionnaire (PHQ) and the Generalized Anxiety Disorder (GAD) scale, BrightView patients reported reduced anxiety and depression in their first **90 days** of treatment, along with better sleep. **P-value below 0.0001.**

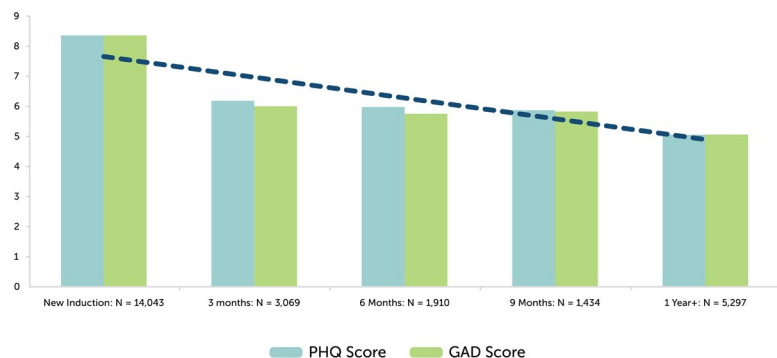
Decreased Incarceration and Fewer Arrests

Criminal justice statistics detail a punitive national policy approach to substance use disorder in the United States. Research estimates that **65%** of our nation's current prison population has an active SUD. **Another 20%** do not meet the official criteria for an SUD but were under the influence of drugs or alcohol at the time of their crime.⁴

BAM Results



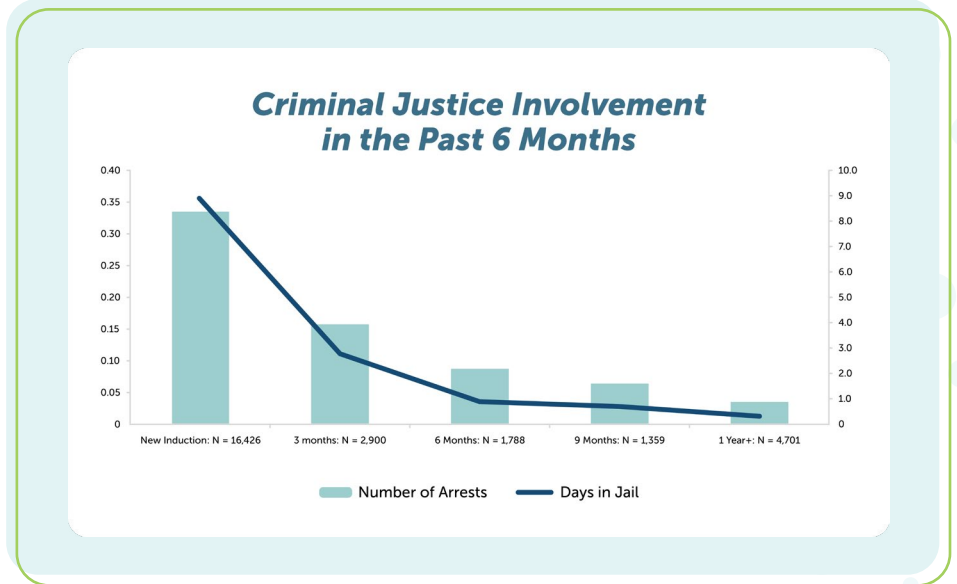
PHQ & GAD Results



Every minute, there are two arrests for drug possession in the United States. To combat surging drug-related incarceration and criminal justice costs, BrightView provides comprehensive, evidence-based care to help patients overcome substance use disorder and help communities heal. Effective substance use disorder treatment offers marked reductions in length of incarceration, new arrests, and recidivism.

ARRESTS: DECREASED 60%

BrightView patients decrease arrests by **nearly 60%** in the first **90 days** of treatment. With a **p-value less than 0.00001**, the impact of successful treatment on arrests is unmistakable.



INCARCERATION LENGTH: 70% REDUCTION

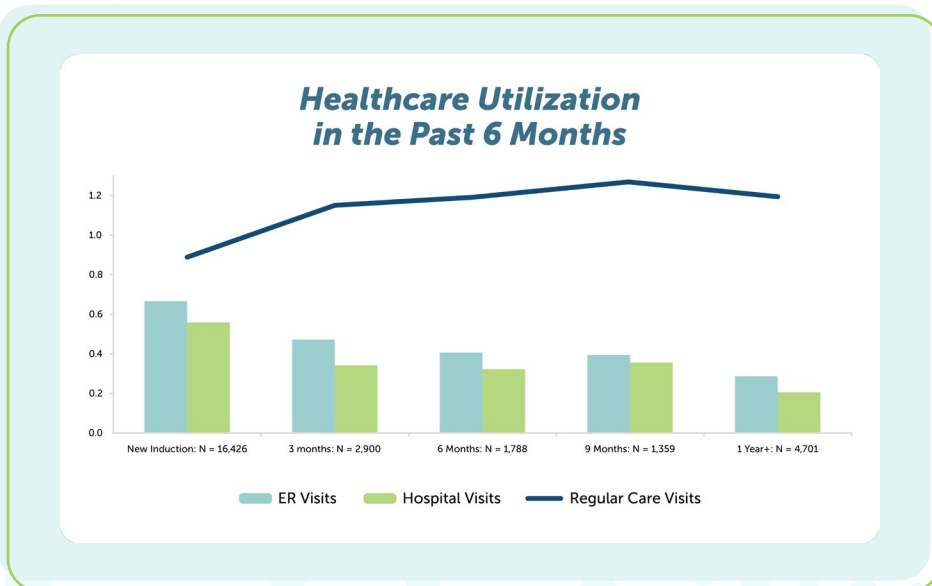
Within the first **3 months** of treatment, patients' time spent in jail declines by **nearly 70%**. **P-value less than 0.00001**. The benefits of these reductions to communities are especially promising given that local governments are responsible for **almost 50%** of criminal justice costs nationally.⁵

Decreased ED Use, Increased Preventative and Routine Healthcare

Emergency Departments (ED) have become the default source of medical care for individuals with substance use disorder. In fact, nearly half of all ED visits can be categorized as related to SUD.⁶ Patients present seeking SUD treatment, withdrawing from substances, with other complications of their disease, such as injection-related infections.

Identifying untreated substance use disorder in the Emergency Department enables providers to identify, diagnose, and triage patients with SUD to life-saving, specialty addiction medicine care. Initiating treatment within the ED and establishing an immediate follow-up referral appointment improves outcomes for individuals with SUD.⁴ Implementing these programs can be facilitated more easily if referral networks of readily accessible outpatient community providers

and treatment programs are established. Smooth transitions to successful outpatient treatment programs are crucial to break the cycle of Emergency Department over-utilization. BrightView patients engaged in treatment have demonstrated both reduced visits to Emergency Departments and increased participation in routine and preventative healthcare.



IN ED VISITS: 50% REDUCTION

In their first **90 days** of treatment, BrightView patients reduce emergency department visits by one-third. After one year of sustained treatment, the reduction in visits climbs to **50%**. An associated **p-value below 0.00001**

indicates that BrightView's program yields this change.

ENGAGEMENT WITH NON-EMERGENT MEDICAL CARE PROVIDERS: INCREASED

Within their first **90 days** of treatment, BrightView patients increase their participation with non-emergent medical providers such as primary care physicians, medical specialists, and dentists by **nearly 50%**. This rise in care participation is partially due to patients routinely engaging with a medical professional as part of their addiction treatment, with referrals to other healthcare providers as indicated.

THE BRIGHTVIEW APPROACH: COMPREHENSIVE OUTPATIENT TREATMENT ON DEMAND

BrightView's evidence-based programs include medication assisted treatment (MAT), individual counseling, group therapy, and social services support, as well as work on co-occurring disorders. Individuals, families, and referral partners can call **833-510-HELP (4357)** 24 hours a day, seven days a week, or schedule an appointment online at www.brightviewhealth.com. The path to recovery begins immediately: people in active withdrawal receive stabilizing medication and complete their first counseling session within four hours. BrightView's compassionate and professional staff create an accessible and welcoming environment for physical and emotional healing. To learn more, visit brightviewhealth.com.

REFERENCES

1. National Institute on Drug Abuse (2020)
2. Substance Abuse and Mental Health Services Administration, National Survey of Substance Abuse Treatment Services (2018)
3. Ibid
4. Ibid
5. O'Neill Hayes, T. American Action Forum (2020), The Economic Costs of the U.S. Criminal Justice System
6. Drug Abuse Warning Network (2010), Highlights of the 2010 drug abuse warning network findings on drug-related emergency department visits