

Consider the Strength of Northpoint's Inpatient Drug & Alcohol Rehab Program

*Results from the
Milliman Outcomes Assessment Report*



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What is the Milliman Outcome Assessment Report?

Northpoint prides itself on ethical, effective and caring practices in addiction recovery.

We wanted to provide an independent evaluation of our drug and alcohol addiction treatment program.

So we contracted Milliman - One of the world's largest and most reputable companies that provide objective analytical and actuarial services.

We are one of the **1st addiction treatment centers** to seek out, complete and share the results of an intensive Milliman study to assess our program and success rates.

During the 1950s, Milliman & Robertson established the first health insurance benchmarking tool for the US healthcare market. Milliman produces economic indexes for the American healthcare and insurance markets, including the Milliman 100 Pension Funding index.

About The Report

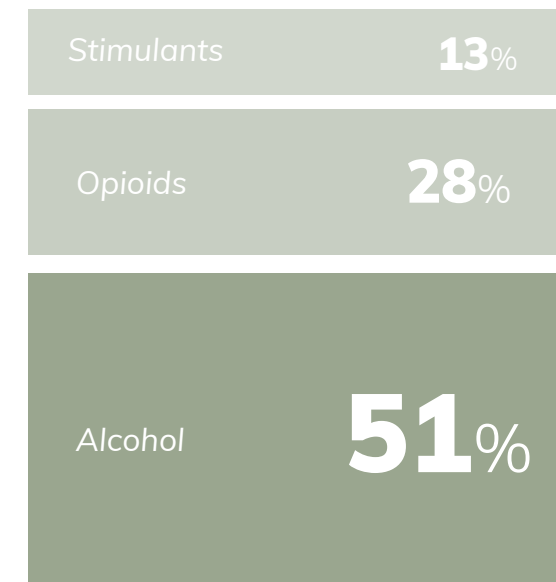
The report analyses 3 key behaviors (outcomes) of a group of patients who received substance addiction treatment at Northpoint's inpatient facility between May 2015 and August 2018. All patients were tracked for a year immediately after finishing their inpatient treatment.

Patients in the study received detox and/or rehabilitation services at Northpoint's inpatient facility and used Northpoint's services for outpatient/continued* treatment after discharge from May 2015 through August 2018.

**Outpatient services provided at the Ashwood Location*

The Substances

The most commonly used substances identified for patients admitted to Northpoint between May 2015 and August 2018 were alcohol (51%), opioids (28%), and stimulants (13%)*



* Most Commonly Used Substances



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Northpoint Recovery's 28-Day Inpatient Program

The detox and rehab program at Northpoint Recovery is an all-encompassing solution to drug and alcohol addiction treatment. Our inpatient program lasts 28 days with several weeks or months of outpatient care after discharge

Inpatient Treatment (Residential Care)

Offers full-time accommodation at our facility while patients undergo rigorous addiction treatment and therapy

Patients receive round the clock professional medical support

Patients completing the inpatient program were less likely to be readmitted within a year of treatment

Patients with longer stays at Northpoint were less likely to have non-compliant urinalysis results compared to patients with shorter stays

When patients complete the 28-day program as designed, they have higher success rates than those who leave before

The 3 Patient **Outcomes Assessed**

| The key measurements used to assess the outcome of treatment patients received at Northpoint were:

Readmission Rates

How many patients returned to Inpatient Care at Northpoint after being discharged (completing treatment or voluntarily leaving)

Engagement with Outpatient Therapy

How long patients used the services at our Outpatient Treatment Facility at Ashwood Recovery (continuing care) once they had left the Inpatient Care facility at Northpoint

Non-compliance with a Urinalysis

How many patients failed a drug test because one or more substances were found in their urine

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Key Highlights From The Study

Patients who spent more time in the Inpatient Program at Northpoint had better results

Compared to other patients, those who stayed 22 days or more in the Inpatient Program:

- Had lower readmission rates: Fewer had to go back to Inpatient treatment after leaving*
- Spent more time using our Outpatient Therapy services*
- Had higher rates of compliance with the urine drug test*



Other Key **Highlights**

Patients who received both detox and residential rehab treatment showed better outcomes than those only received one type of treatment

Those who received Vivitrol (Naltrexone) at the end of inpatient treatment showed better results than those who did not

Treatment was similarly effective for all patients, regardless of age, sex, or insurance coverage status

Patient demographics

Patients 18 to 24 years old had higher readmission rates than older age groups

There were no clear differences in rates of noncompliant urinalysis by patient age, sex, or insurance coverage

Women and patients with insurance coverage were most likely to engage with outpatient follow-up care after discharge



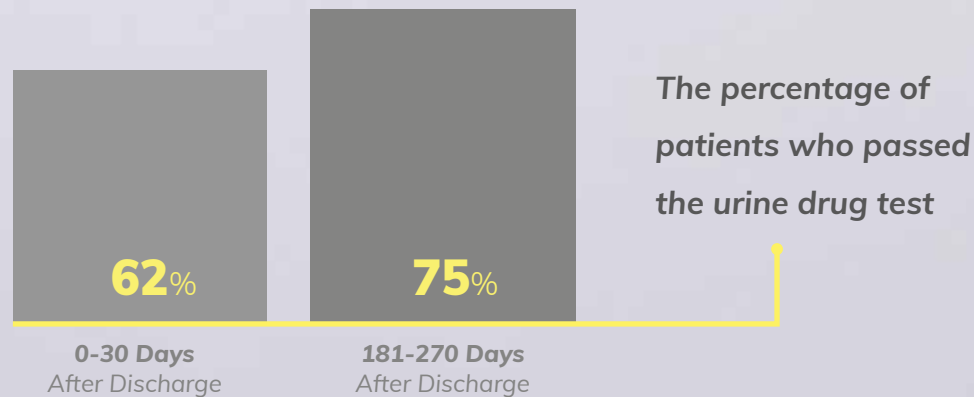
Drug Test (Urinalysis) Results

Patients were given urine drug tests in specific time periods:

0-30 Days | 31-90 Days | 91-180 Days | 181-270 Days | 271-365 Days

Among patients tested in the first 30 days after leaving inpatient care, **62%** passed the drug test

However, of patients tested between **181 and 270 days** after discharge, **75%** of them passed the drug test

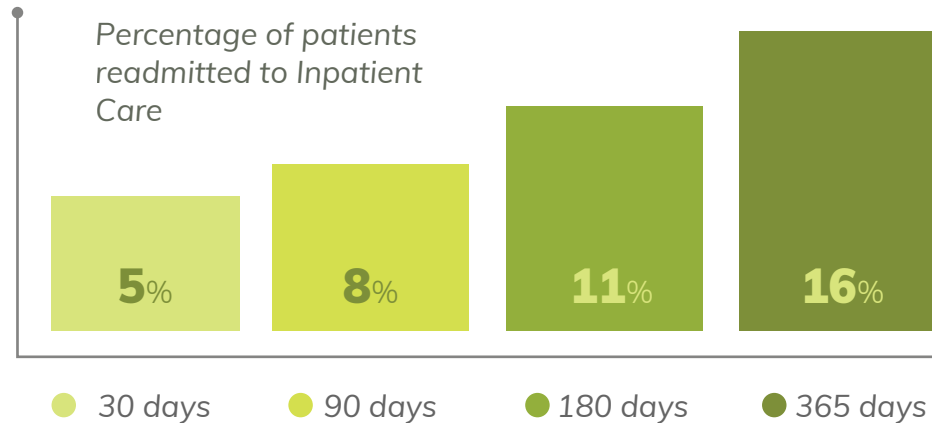


Readmission

Of all the patients in the study who were readmitted to the inpatient program at Northpoint:

5% were readmitted in the first 30 days

16% were readmitted within one year following discharge



Participation in Outpatient Treatment After Discharge

Every patient is referred to outpatient services when they leave Northpoint's Inpatient Program

21% of Northpoint patients made use of outpatient follow-up therapy at the Ashwood outpatient facility for at least 30 days after leaving Northpoint

Patients who stayed longer in the inpatient program were more likely to use outpatient care



Length of Stay at Northpoint

The longer patients stayed in Northpoint's Inpatient Program, the better their results

Longer Stays:

More than 28 days

Shorter Stays:

1-7 days

Compared to patients with shorter stays, longer stay patients were:

80%

less likely to be readmitted within 30 days

56%

less likely to fail the drug test within 30 days of discharge

52%

less likely to be readmitted within a year

Nearly **12 times** more likely to continue outpatient therapy for at least 90 days after discharge

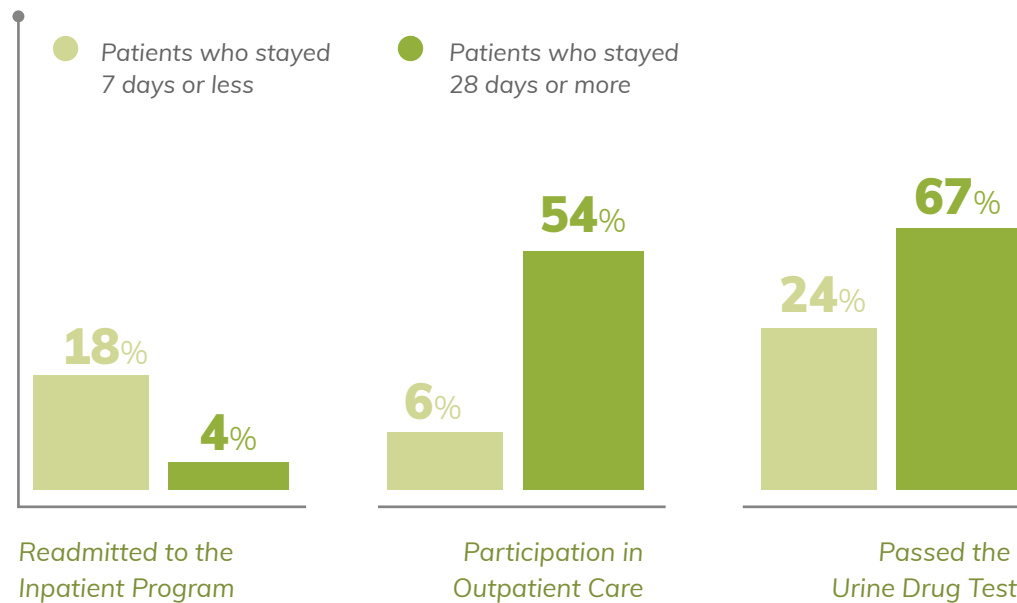
In general, compared to shorter stay patients, longer stay patients were also:

- > More likely to continue with outpatient care
- > Less likely to fail a urine drug test

Patients who completed our recommended 28-Day Program, showed the best results

The first 30 days after discharge

Comparing the results of patients who stayed less than 7 days in inpatient care to those who stayed for 28 days or more



Patients who stayed for the full 28-day program showed significantly better results in the first 30 days after completing inpatient treatment

Treatment type matters

Over half of patients admitted to Northpoint were admitted for both residential and detoxification treatment - These patients had the best results

Patients admitted to Northpoint for both detoxification and residential treatment had better outcomes than those admitted for detoxification only



Vivitrol Success

Vivitrol helped patients to avoid relapse and readmission

Vivitrol is a injectable version of the drug Naltrexone

As part of Northpoint's treatment program, patients may be given Vivitrol to help prevent relapse

Naltrexone is used primarily to help prevent relapse to opioid dependence after detox and to treat alcohol dependence.

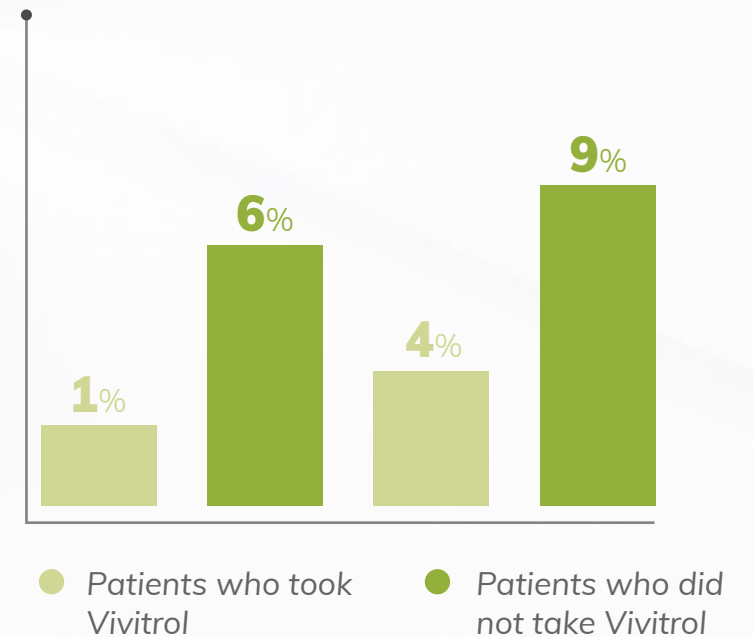
About 19% of patients were given Vivitrol at the end of inpatient treatment. Compared to patients who did not receive Vivitrol they:

Had lower 30-day, 60-day, and 180-day readmission rates

Were less likely to fail the urine drug test

Were more likely to use outpatient follow-up care

Readmission Rates to Northpoint by Patient Use of Vivitrol



Alumni Participation

Northpoint has an alumni Facebook group and app available for current and former patients

At Northpoint, we pride ourselves on having a strong alumni program where we continue to engage and connect alumni who have gone through any of our treatment programs

These supportive interactions include a private facebook page, in-person events, surveys, an e-newsletter and an app for phones. We believe, and our data supports, that those who participate in our alumni program are more likely to have long-term success

Alumni participants had higher rates of passing the drug test and higher rates of participation in Ashwood's outpatient services than non-alumni participants

Alumni participants were at least twice as likely to engage in outpatient follow-up care as nonparticipants

