
Groups Recover Together Clinical Model & Outcomes

2023

recover together

THE OVERDOSE EPIDEMIC

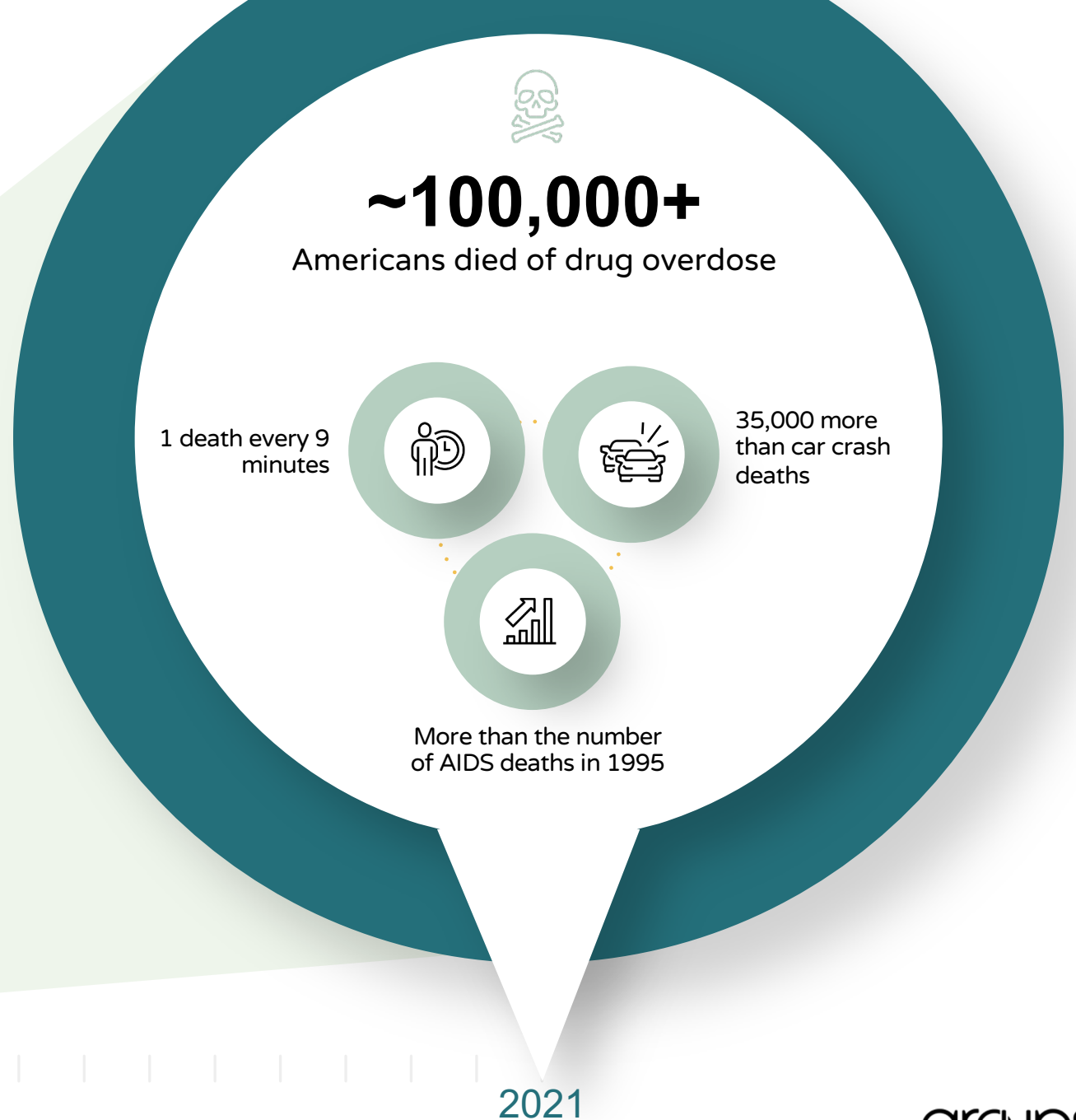
is one of the greatest public health challenges of our time, and it's worsening rapidly:

28% YoY increase

50% of all overdose deaths involve polysubstance

70% involve opioids

80% of those in need do not access care



PATTERNS OF OVER- AND UNDER-UTILIZATION WITHIN SUD TREATMENT LEAD TO LOW-VALUE CARE & HIGH COST

Expensive, low-value services are **OVERUTILIZED:**



46% receive ED services
(avg 2 days per person in tx)



49% receive inpatient or residential services
(avg 10 days per person in tx)



74% get no outpatient follow up

While high-value, effective modalities remain **UNDERUTILIZED:**



OF THOSE WHO GET TX:

ONLY 1/5TH receive any tx at all



ONLY 25% receive any counseling



ONLY 21% receive medications



ONLY 4.9% receive case management

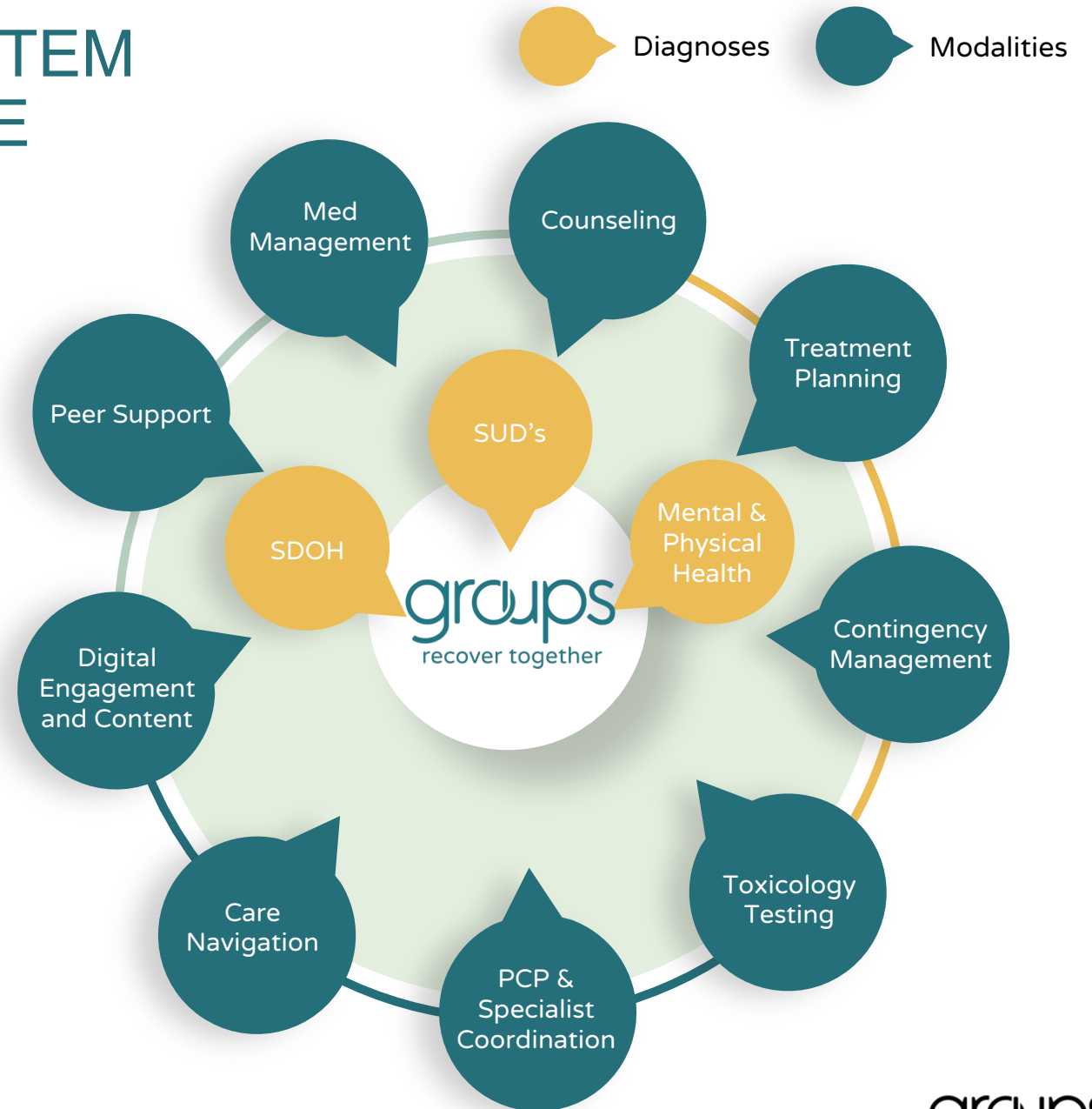


ONLY 2.5% receive community support

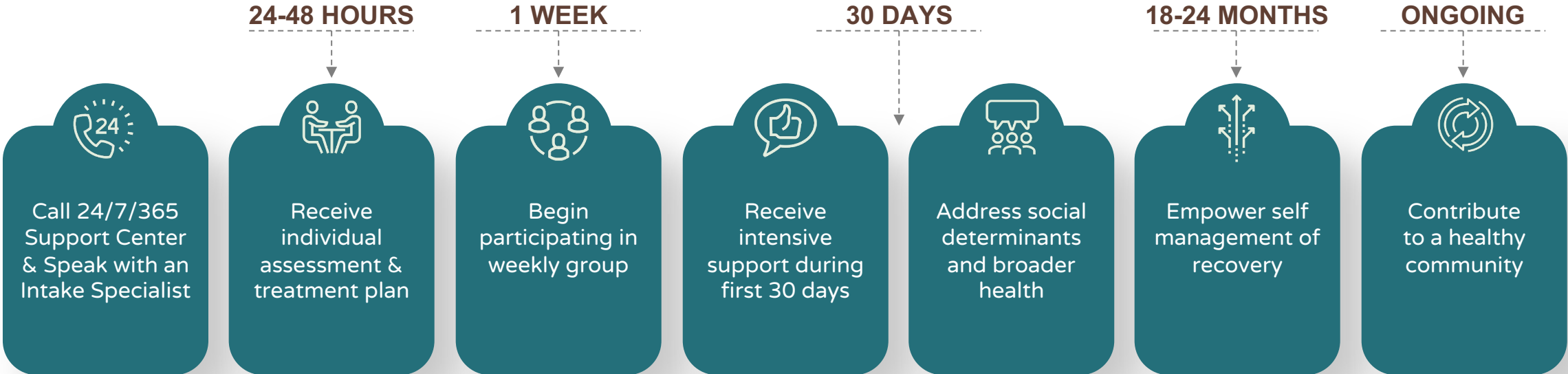


ONLY 1% receive peer support

THE GROUPS RECOVERY SYSTEM IS BUILT TO BREAK THE CYCLE



Our flexible, weekly model ensures that members receive the services and support they need FROM DAY ONE THROUGH ONGOING RECOVERY



M.A.T.
Encouraged for opioids, alcohol, nicotine

BEHAVIORAL INCENTIVES
Utilized for stimulants, polysubstance

PSYCH SERVICES
Provided for those who screen positive

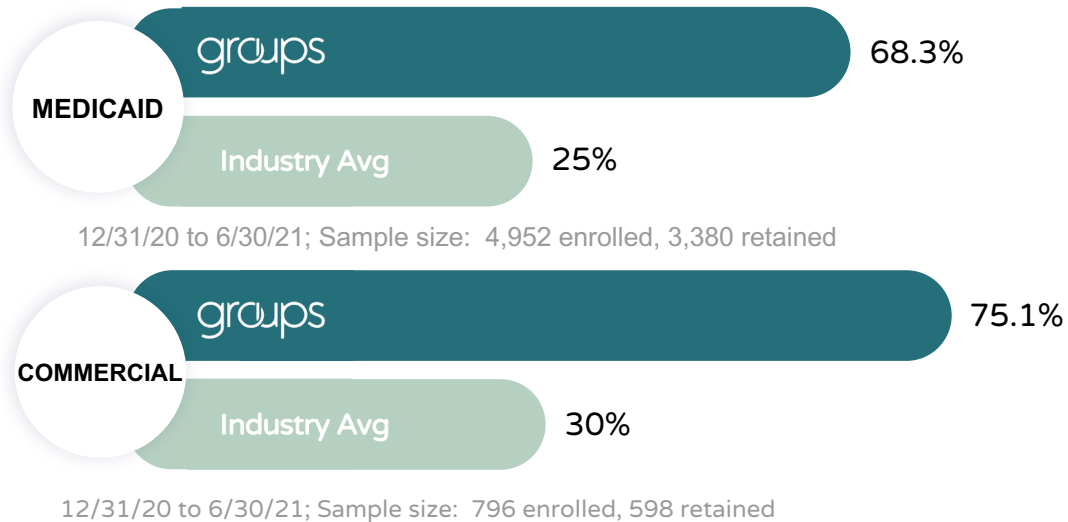
CARE NAVIGATION
For SDOH needs, medical complexity

SPECIALTY PROGRAMMING
Emphasized for pregnancy, incarceration, trauma

OUR UNIQUE MODEL DELIVERS CLINICAL OUTCOMES 2-4X THE INDUSTRY STANDARD.

6 Month Retention is the key benchmark for clinical efficacy in our industry

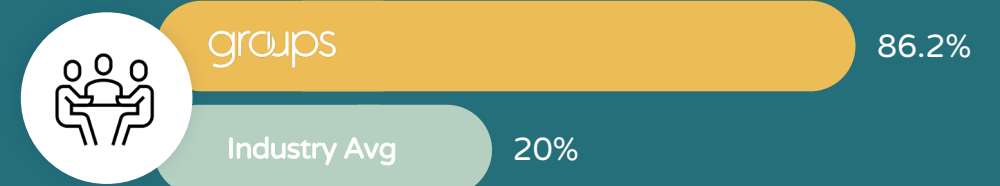
% of patients engaged in treatment 6 months after intake



Attendance and abstinence are leading indicators of retention and predictors of long-term recovery

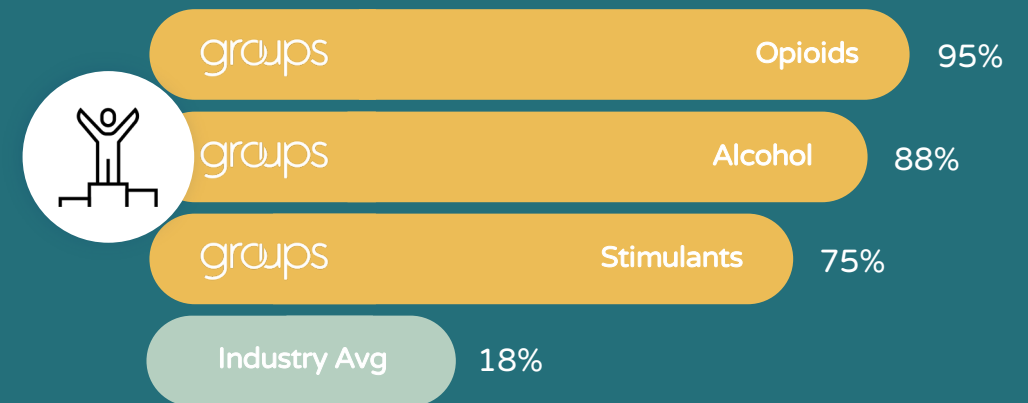
% scheduled group therapy sessions attended and % urine drug screens negative for illicit opioids, alcohol and stimulants

Weekly Attendance at Group Therapy



Sample size: 269,768 scheduled sessions; 232,447 attended sessions

Abstinence from illicit substances

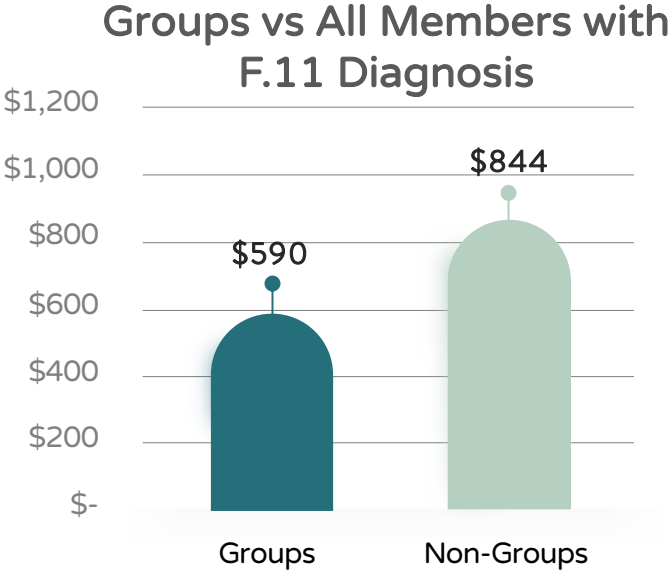


Source: Groups KPIs; Proposed Medicaid HEDIS benchmark via NCQA; Mattick, Richard P., et al. "Mark Olfson, "Buprenorphine Treatment By Primary Care Providers, Psychiatrists, Addiction Specialists, And Others," Health Affairs, June 1, 2020, <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2019.01622?journalCode=hlthaff>.

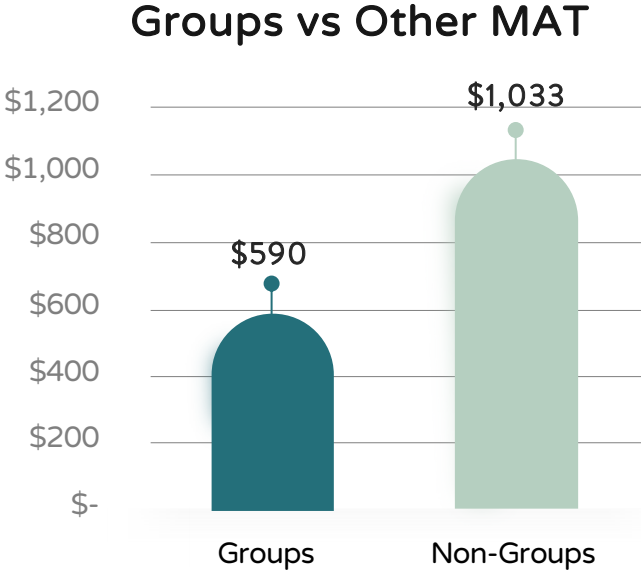
GROUPS' TREATMENT REDUCES TOTAL COST OF CARE COMPARED TO OTHER FORMS OF SUD CARE, AS WELL AS NON-ENGAGEMENT

MONTHLY TOTAL COST OF CARE (PMPM)

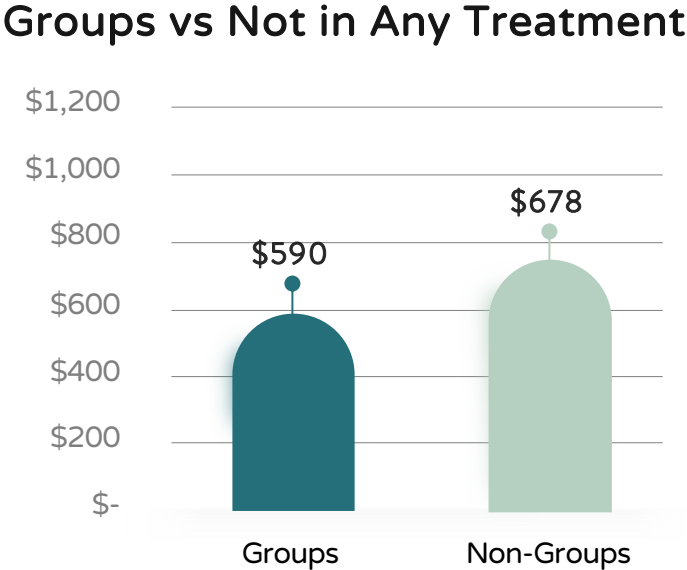
- Claims cost analyzed for 1,597 MCO members receiving treatment from Groups and 2,923 members with an OUD diagnosis (Dates of service 4/2017-4/2022)
- Total cost of care inclusive of physical, behavioral, and prescription spend



Groups' Reduction in Spend: \$254 PMPM



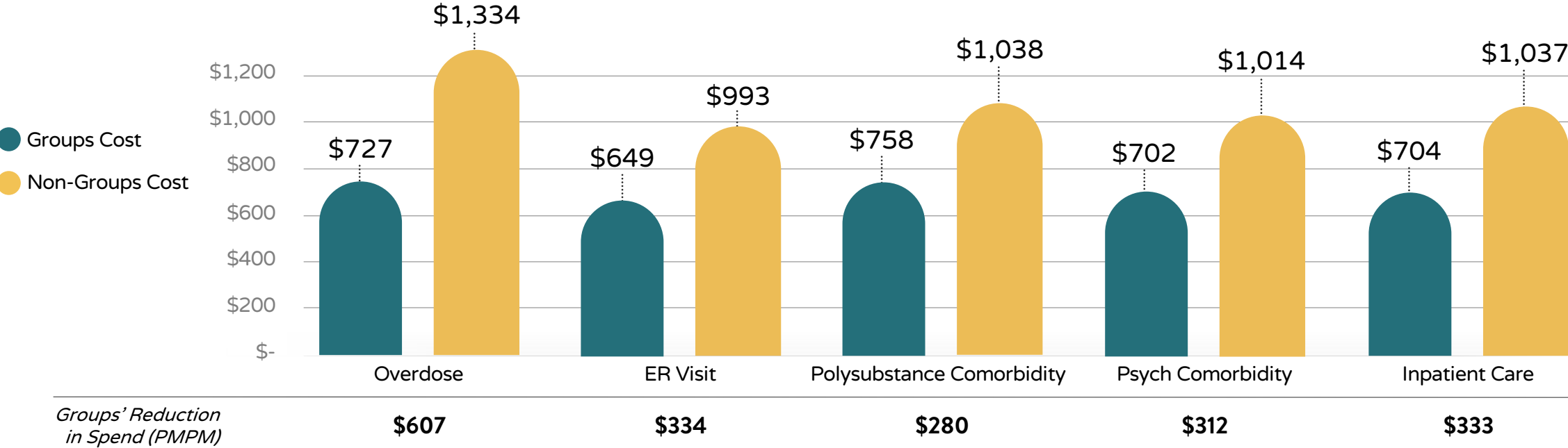
Groups' Reduction in Spend : \$443 PMPM



Groups' Reduction in Spend : \$88 PMPM

GROUPS IS PARTICULARLY IMPACTFUL FOR HIGH-COST/ HIGH-RISK MEDICAID BENEFICIARIES

MONTHLY TOTAL COST OF CARE (PMPM) for Members with Previous Conditions/Events

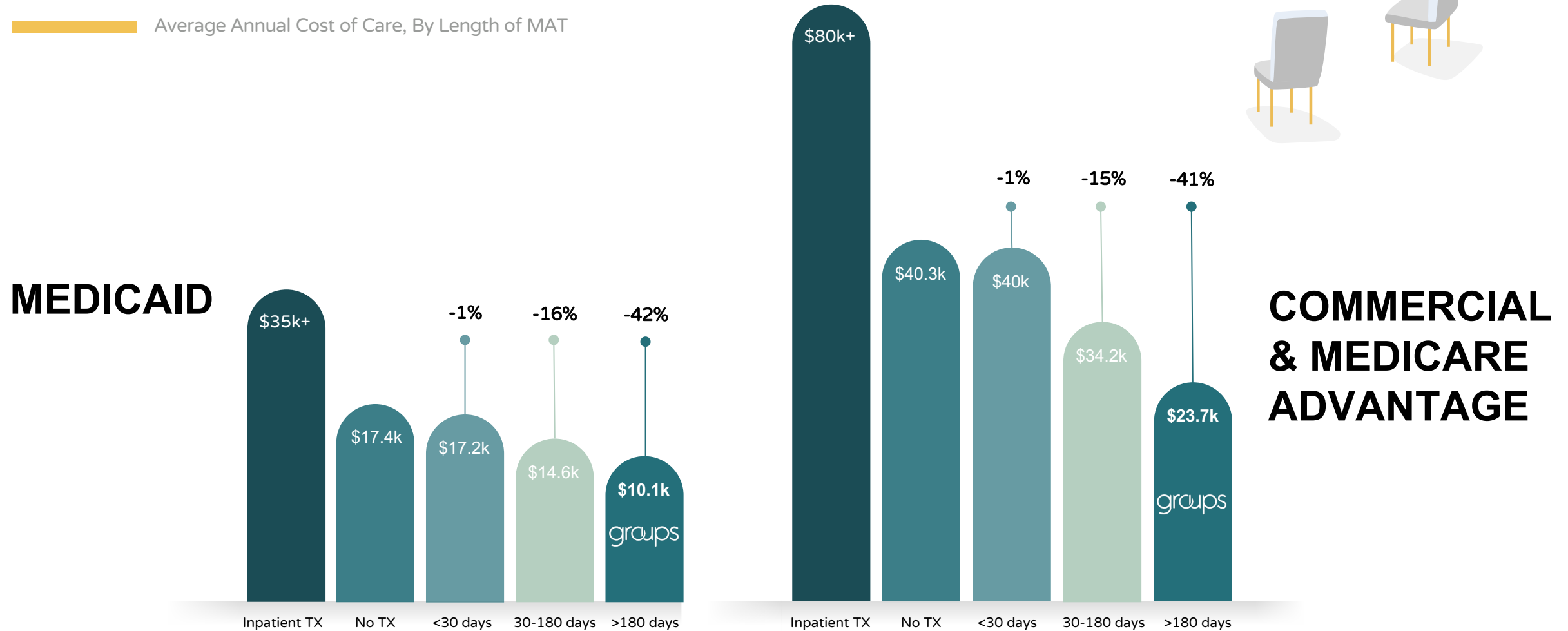


Groups has substantially improved relative performance in cases of more severe opioid use disorder. In particular, the percent savings for overdose patients are very large, suggesting that this group derives above-average benefit from Groups treatment and should be considered a target.

Large-scale claims analysis shows:

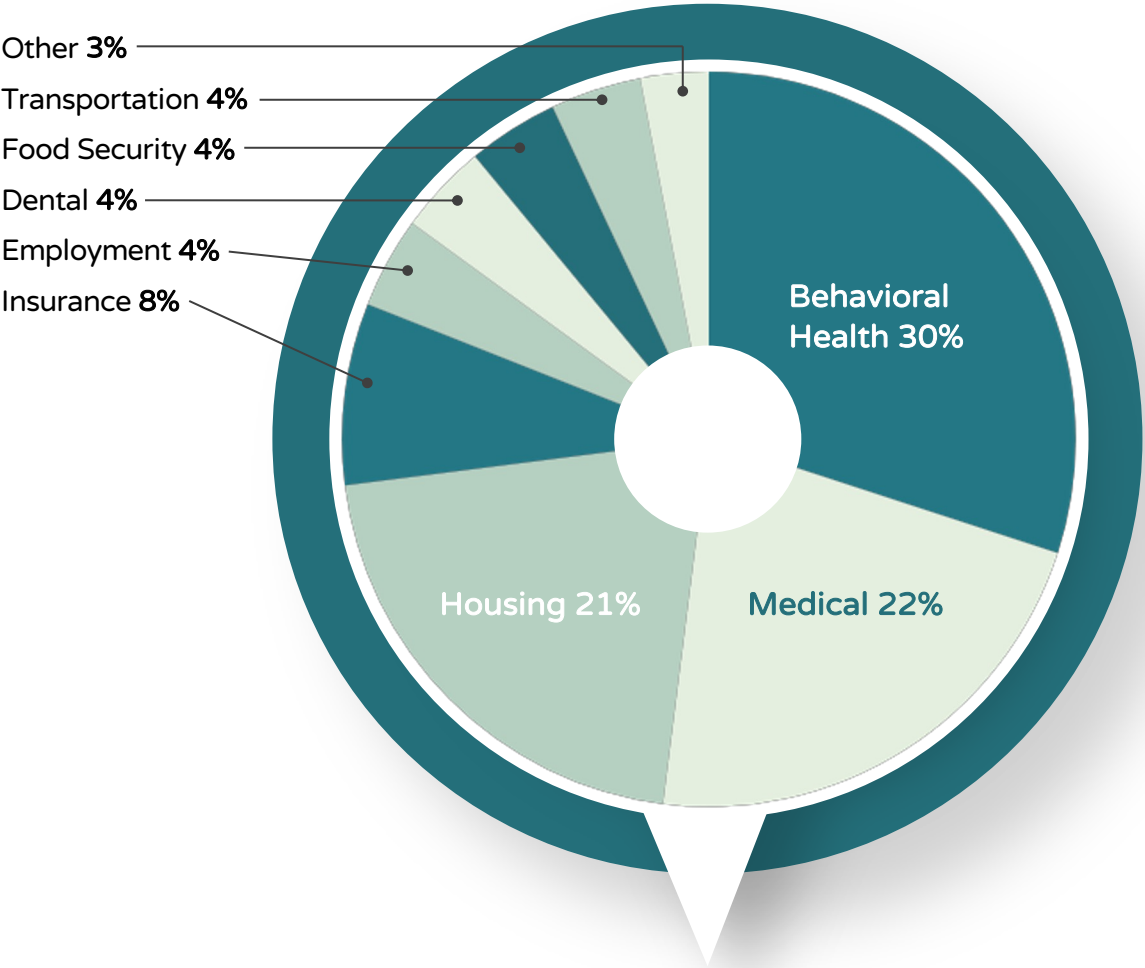
LONGER RETENTION IN TREATMENT YIELDS BIGGER REDUCTIONS IN TOTAL COST OF CARE FOR SUD PATIENTS

Average Annual Cost of Care, By Length of MAT

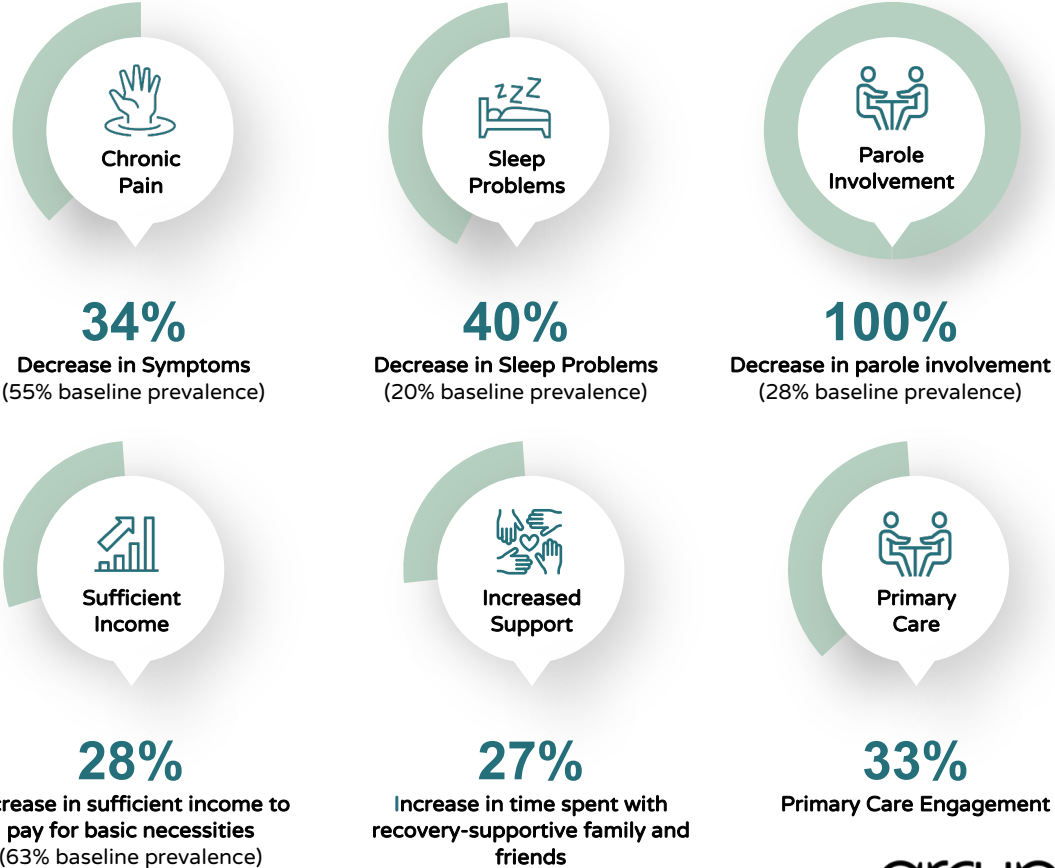


OUR MEMBERS HAVE A VARIETY OF SDoH NEEDS WHICH WE EFFECTIVELY ADDRESS THROUGH CARE NAVIGATION

CARE NAVIGATION MILESTONES ACHIEVED



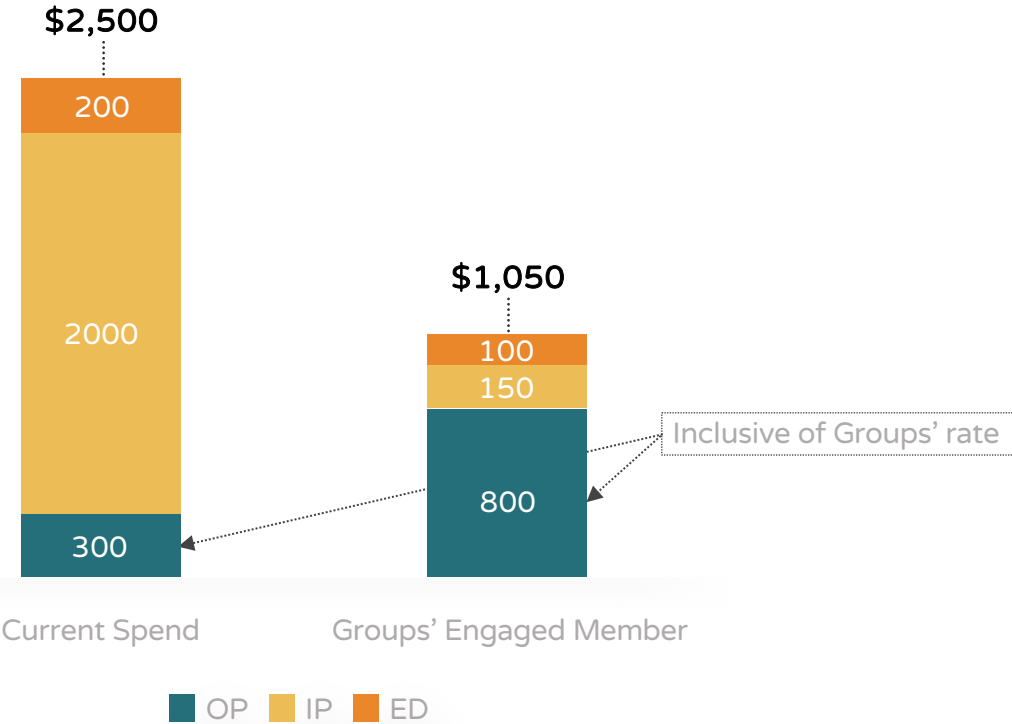
27% INCREASE IN HOLISTIC PHYSICAL HEALTH PER VALIDATED SELF-REPORT



BUNDLED STRUCTURE SIMPLIFIES RECONCILIATION WHILE DELIVERING REDUCTIONS IN TOTAL COST OF CARE

TOTAL COST OF CARE (PMPM) FOR “CURRENT TREATMENT” COMPARED TO ENGAGED MEMBERS

Illustrative example based on previous plan analysis



BENEFITS OF BUNDLED CONTRACT STRUCTURE

- Groups' bundled rate includes existing OP care and holistic services not covered by fee schedule (peer support, education, SDOH, case management), as well as a 50% shared savings on 33-42% total cost of care reduction
- Rate tied to clinical outcomes (i.e 6-month retention) avoiding complicated reconciliation on shared savings. Retention in treatment at 6 months is correlated to 33-42% total cost of care reduction
- Rate only paid for members meeting minimum service requirement (otherwise services delivered at no cost to plan)
- The plan is protected by a 75% fee reduction should Groups not meet clinical outcomes



GROUPS' MODEL DIRECTLY SUPPORTS HEDIS PERFORMANCE

KEY HEDIS METRICS GROUPS CAN SUPPORT

METRIC	DESCRIPTION	INDUSTRY AVERAGE*	GROUPS' COHORT PERFORMANCE	HOW WE IMPACT PERFORMANCE
Pharmacotherapy for OUD (POD)	Percent of new OUD pharmacotherapy events with Rx for 180+ days	28%-38%	54%	<ul style="list-style-type: none"> Clinical model highlights weekly prescribing in conjunction with group
Initiation and engagement of treatment (IET, Engagement)	Percent of members who initiate treatment and had 2+ services within 34 days	8%-28%	72%	<ul style="list-style-type: none"> Retention in treatment and engagement exceeds benchmarks
Follow up after hospitalization/intensive care/ED (FUA/FUI/FUH)	Percent of ED/IP hospitalizations receiving a follow up outpatient appointment	13%-40%	55%-79%	<ul style="list-style-type: none"> Rapid access to care (within 48 hours) Weekly scheduling ensures compliance with 30-day measures
Adult access to preventative services (AAP)	Members receiving preventative health care services	N/A	N/A	<ul style="list-style-type: none"> Care navigators work closely with each member on total health outcomes

Appendix

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OUR MODEL DELIVERS INDUSTRY-LEADING REDUCTIONS IN TOTAL SPEND, PHYSICAL HEALTH SPEND, AND BEHAVIORAL HEALTH SPEND, INCLUSIVE OF OUR RATE

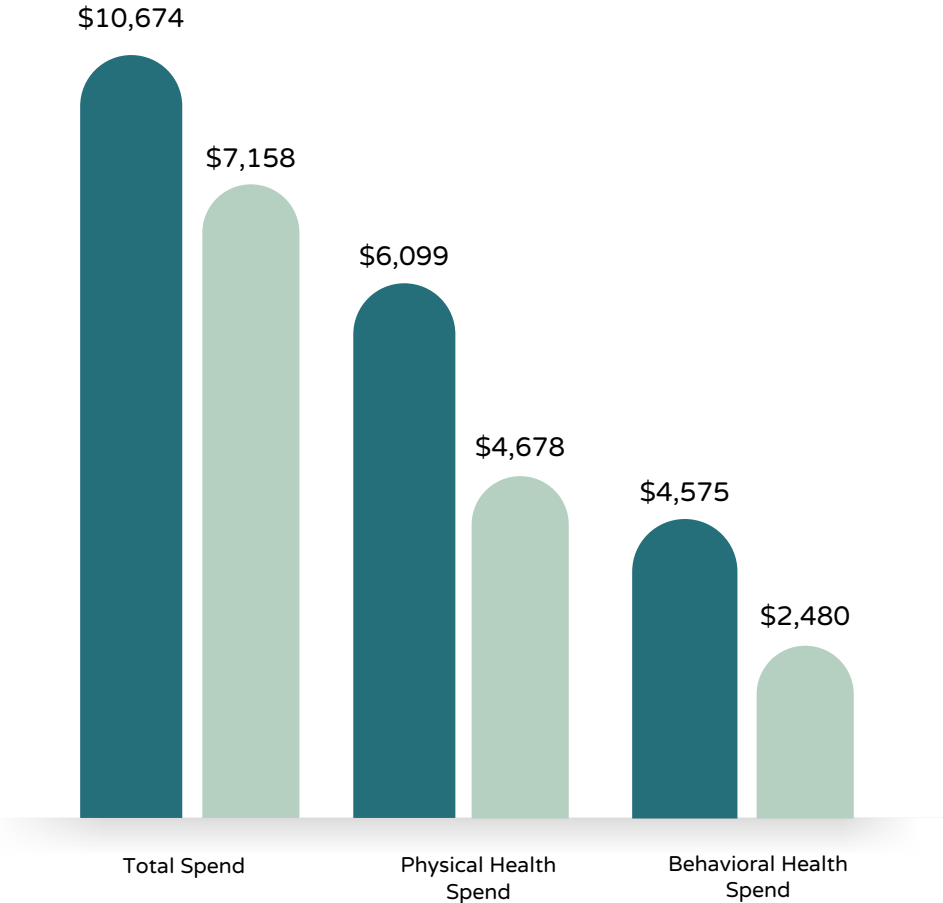
Analysis time period: January 2020 – July 2022

Relative to the “matched cohort”, GRT spend on OUD members was:

- 33% less overall (\$2.9M over 12 months)
- 46% less for behavioral health (\$1.74M over 12 months)
- 23% less for physical health (\$1.2M over 12 months)

● Matched Cohort
581 Members

● Groups Cohort
831 Members



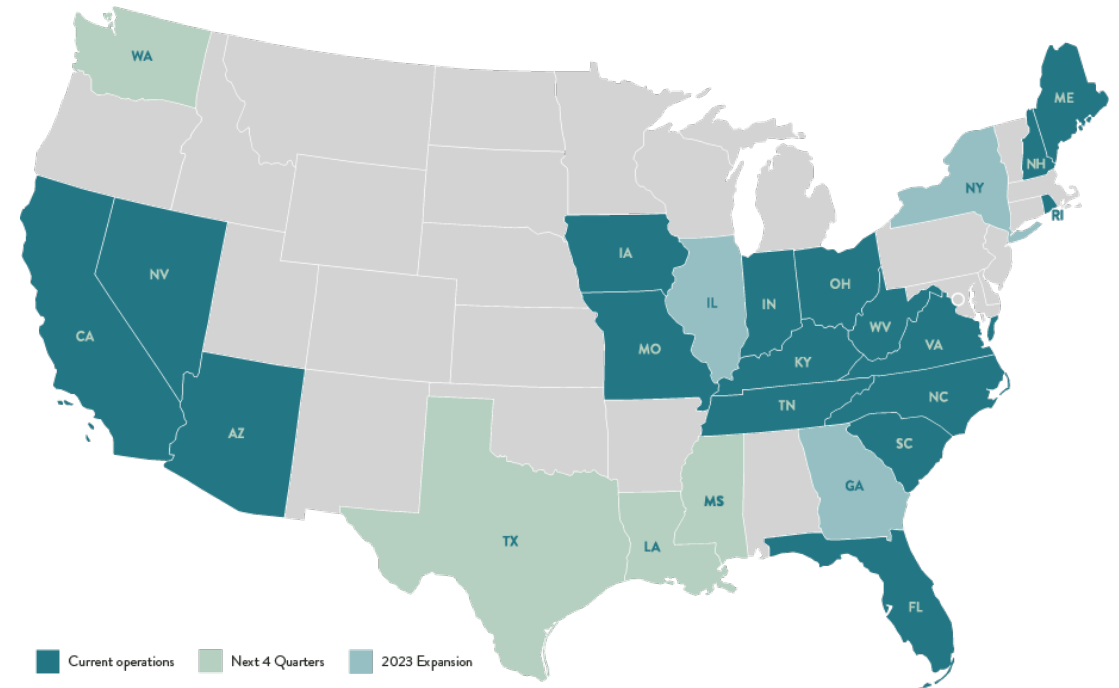
WE HAVE PROVEN OUR ABILITY TO SCALE WITH QUALITY



NATIONAL PRESENCE...
125+ Offices in 17 States



...AND EXPANDING
Opening 75+ offices next year






+ QUALITY & OUTCOMES
50k+ commercial, Medicaid, Medicare, and uninsured members served; national CARF accreditation

+ DIVERSE PARTNERSHIPS
Connectivity with primary care, ED, corrections and payers drives population-level impact

+ BUILT FOR VALUE
95% of payer contracts are bundled; proven ability to take upside/ downside risk

WE DEPLOY THE FULL SPECTRUM OF EVIDENCE-BASED MODALITIES REQUIRED TO EFFECTIVELY MANAGE SUD

		OPIOIDS	ALCOHOL	STIMULANTS	NICOTINE	PSYCH
	Medication management	✓	✓	N/A	✓	✓
MEDICAL MODALITIES	Laboratory screenings	✓	✓	✓	✓	✓
	Toxicology testing	✓	✓	✓	✓	N/A
	Health screenings	✓	✓	✓	✓	✓
	Collaborative care	✓	✓	✓	✓	✓
	Counseling	✓	✓	✓	✓	✓
BEHAVIORAL MODALITIES	Individualized treatment planning	✓	✓	✓	✓	✓
	Peer support	✓	✓	✓	✓	N/A
	Community Reinforcement	✓	✓	✓	✓	N/A
	Measurement based care	✓	✓	✓	✓	✓
	Behavioral incentives/ Contingency Mgmt.	✓	✓	✓	✓	N/A
SOCIAL MODALITIES	SDOH screenings	✓	✓	✓	✓	✓
	High-touch support and referrals	✓	✓	✓	✓	✓
	Care coordination	✓	✓	✓	✓	✓

THE GROUPS MODEL IS UNIQUELY EFFECTIVE FOR HIGH RISK & HIGH COST POPULATIONS WHO MANY PROVIDERS REFUSE TO SERVE

PREGNANCY

4.1% of Groups Members are pregnant; these members stabilize in treatment during pregnancy and remain stable after

Member data from 1/1/19-6/30/21

RETENTION % of patients engaged in treatment 6 months after intake compared to



ATTENDANCE % of patients engaged in treatment 6 months after intake compared to



ABSTINENCE % of patients engaged in treatment 6 months after intake compared to



CRIMINAL JUSTICE INVOLVED

Groups delivers transitional care & community services for those leaving incarceration; Groups reduces recidivism & fatal overdose upon release by 70%



87% attended the first scheduled appointment



97% remain in the community (i.e. have not been reincarcerated)



88% were admitted by Groups within 48 hours of release

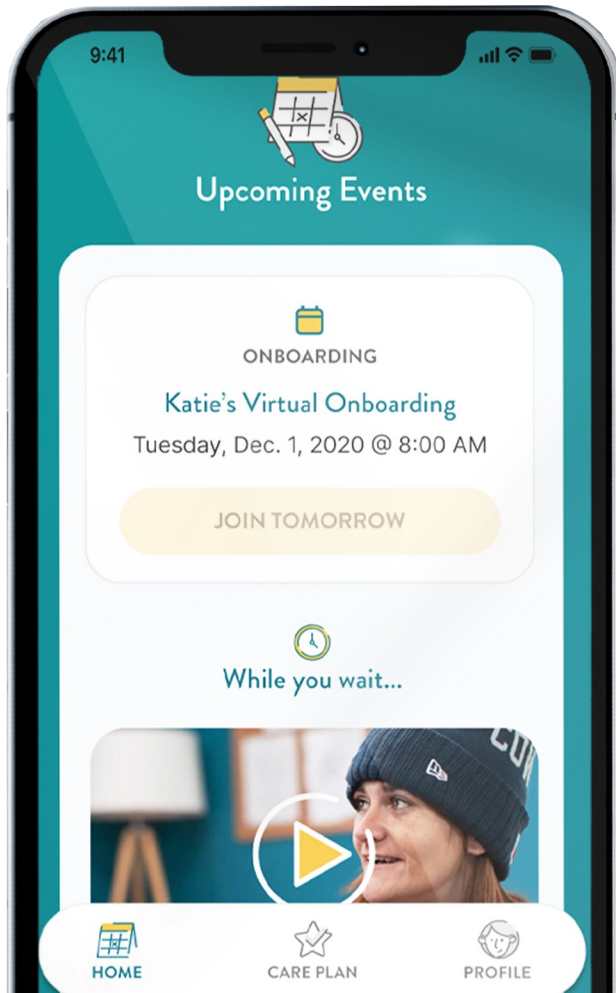


94% are employed



97% have access to safe housing

OUR DIGITAL PRODUCT INCREASES OUR REACH, ENHANCES OUR OUTCOMES, AND DELIVERS A DELIGHTFUL EXPERIENCE TO EXISTING AND NEW MEMBERS



**FULLY INTEGRATED
DIGITAL
EXPERIENCE**

- Rapid access to treatment; instant intake scheduling & seamless onboarding
- In-app telehealth counseling and medical appointments
- Interactive treatment planning, goal setting and progress monitoring
- In-app compliance tools (pill counts, drug screening, pharmacy integration)



**DEEP ENGAGEMENT
BEYOND FOUR
WALLS**

- Request and receive care navigation support
- Chat with counselors and peers
- Crisis button and resources
- Appointment reminders, motivational content, additional curriculum modules



**EVIDENCE-BASED
INTERVENTIONS & REAL-TIME
RISK ANALYSIS**

- Contingency management: Track progress and earn rewards for recovery
- Continuous monitoring via pulse-checks and patient reported outcomes
- Real-time analytics and risk-scoring drive clinical team interventions

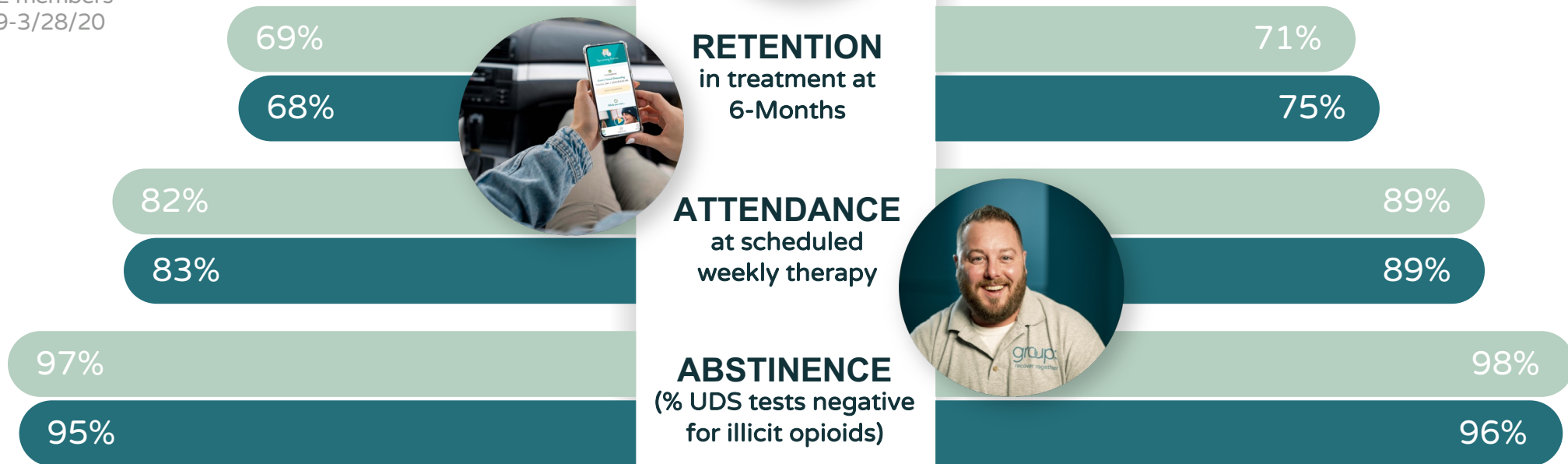
GROUPS' HYBRID MODEL DELIVERS CONSISTENT OUTCOMES WHETHER MEMBERS ENGAGE VIRTUALLY OR IN-PERSON

- Telehealth Cohort
n=2,375 members
3/30/20-12/31/20
- Control Cohort
n=1,532 members
9/30/19-3/28/20

MEDICAID



COMMERCIAL



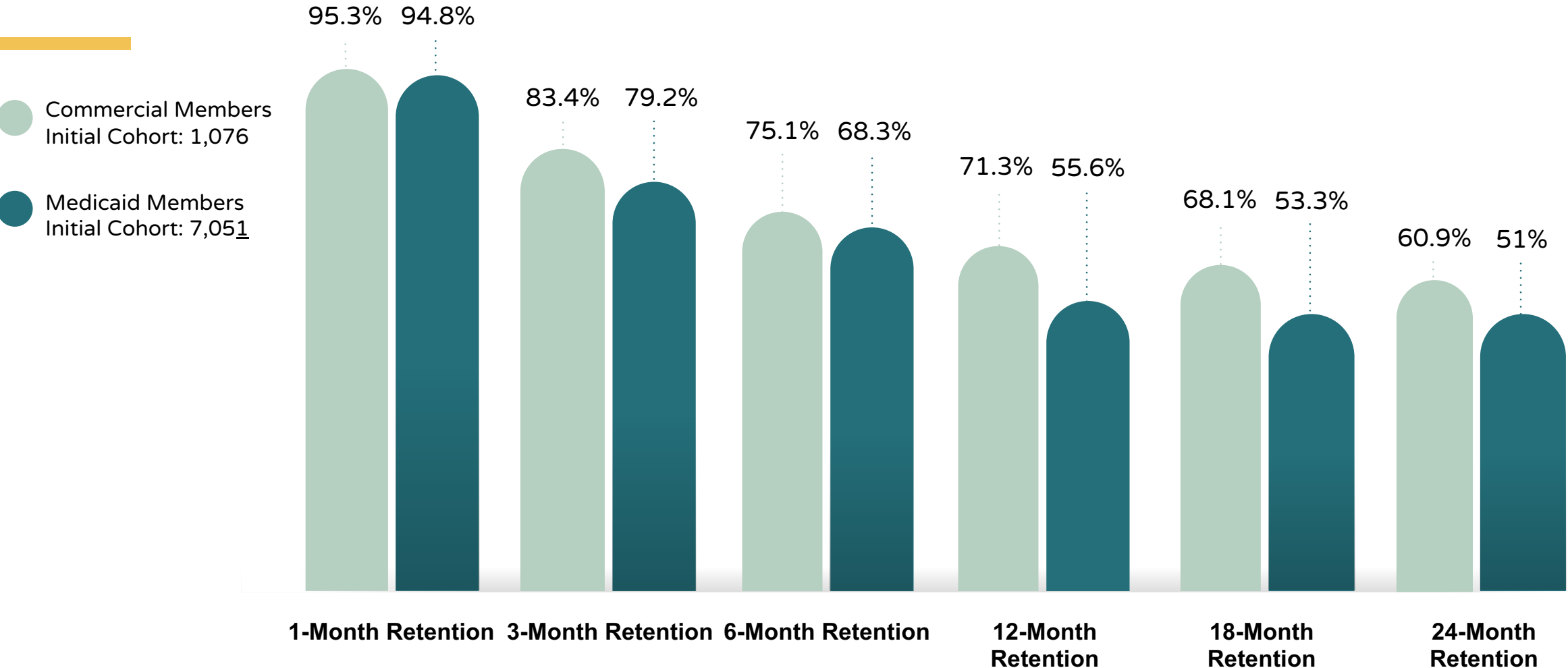
Timeline: 456 Days

GROUPS' HOLISTIC IMPACT ON SUBSTANCE USE BEYOND OPIOIDS IS IMMEDIATE AND DURABLE TO 18 MONTHS

Our model is grounded in the belief that addiction is both a medical and a social condition; by addressing the disease holistically, we're able to achieve holistic outcomes

	Month of Treatment									
	Intake	1	2	3	4	5	6	12	18	
Illicit Opioids Pos %	28%	7%	4%	3%	3%	2%	2%	1%	0%	
UDS Results	7,635	30,650	19,488	19,376	14,312	12,514	12,260	5,435	2,224	
AMP Pos %	18%	8%	6%	5%	5%	4%	4%	3%	2%	
BUP Pos %	75%	97%	98%	98%	98%	98%	98%	98%	96%	
BZO Pos %	10%	4%	3%	3%	2%	2%	2%	2%	1%	
COC Pos %	7%	4%	2%	2%	2%	2%	2%	1%	0%	
FEN Pos %	19%	10%	6%	5%	5%	4%	3%	2%	1%	
MET Pos %	16%	6%	4%	3%	3%	3%	2%	1%	1%	
MTD Pos %	3%	1%	0%	0%	0%	0%	0%	0%	0%	
OPI Pos %	16%	3%	2%	2%	2%	1%	1%	0%	0%	
OXY Pos %	6%	1%	1%	1%	1%	1%	1%	0%	0%	
THC Pos %	37%	32%	32%	33%	33%	33%	33%	33%	31%	
Stim Pos %	25%	12%	8%	7%	7%	6%	6%	4%	3%	
Illicit Pos %	45%	18%	13%	11%	11%	9%	9%	7%	5%	
Non Opioid Illicit Pos %	31%	14%	11%	9%	9%	8%	7%	6%	4%	

MEMBERS WHO REMAIN ENROLLED AT 6-MONTHS ARE LIKELY TO MAINTAIN LONG-TERM SOBRIETY



21 Source: Internal Groups Data. Cohorts admitted between 1/1/2019 and 10/1/2020