



**SOAR CORP RECOVERY CENTER**  
**Annual Report For 2024**

Available to the general public at

<https://www.soarcorp.org>

## Program Overview: SOAR CORP

SOAR CORP is an outpatient substance abuse treatment center with locations in Lansdowne, Philadelphia, Warminster, and Levittown, PA. Our mission is to provide comprehensive, holistic outpatient services to individuals suffering from addiction, utilizing a wide range of individualized services.

### Our Approach and Philosophy

Our program is designed to assist individuals in recovery by helping them examine their lifestyles, learn to make different decisions, and prioritize recovery within a safe, supportive environment conducive to personal change.

SOAR is a Medication-Assisted Treatment (MAT) program. We believe that outpatient treatment is an effective mechanism for assisting individuals in achieving recovery and becoming productive members of society. We utilize specific medications, such as methadone, for detoxification and maintenance purposes to ease the pain and discomfort of withdrawal symptoms.

We operate under a **Person-Served Multi-Disciplinary Team Approach** to provide a holistic approach to treatment that balances physical, mental, and spiritual stability. We are committed to treating individuals with respect and dignity, incorporating lifestyle choices into the individualized treatment planning process.

At SOAR, person-first individualized treatment plans support recovery goals, personal growth, and development. Members are encouraged to be active participants in their recovery by collaborating with the treatment team to achieve personal goals. We also integrate and educate members on local community activities, such as religious organizations, library participation, job and educational resources, and 12-step/sober support networks. Family involvement is encouraged, and counselors complete couple or family sessions upon a member's request.

## **Staffing and Services**

Our Treatment Team consists of highly trained professionals, including Bachelor and Master-level counselors, Licensed Nurses, Medical Doctors, and Advanced Practice Registered Nurses (APRNs). The clinical staff specializes in marriage and family counseling, addiction, co-occurring disorders, and trauma.

## **Evidence-Based Practices**

We have adapted several evidence-based practices into our programming at each site to better assist members. Approaches such as the **Matrix program**, **Illness Management and Recovery (IMR)**, and **Trauma-Informed Care** are currently in use across all locations. Additionally, staff members have completed formal training in specific evidence-based approaches such as **EMDR** and **CBT**. SOAR will continue to encourage clinical staff to obtain training and certification in evidence-based tracks to meet the needs of the members we serve. We offer educational services on relapse prevention, HIV/AIDS, Hepatitis C, STDs, life skills, and educational and employment issues through both group and individual services.

## **Program Structure and Staffing**

Counselor Distribution by Location:

- **Lansdowne:** 6 counselors (2 male, 4 female)
- **Levittown:** 5 counselors (2 male, 3 female)
- **Philadelphia:** 10 counselors
- **Warminster:** 4 counselors (1 male, 3 female)

Full-time counselors typically work a scheduled 40 hours per week. Our current Outpatient (OP) full-time counselors maintain a caseload ratio that does not exceed 35:1, though SOAR attempts to keep the ratio at 30:1 to better meet member needs.

## Quality Assurance

### Sustained Demand and Growth in 2024

In 2024, our programs experienced significant, sustained demand for treatment services across all locations, demonstrating strong growth supported by consistent patient and funding-source inquiries.

#### Philadelphia Office: Growth and Retention Challenges

The Philadelphia office served approximately **632 individuals** in 2024, with funding from various sources, including CBH, BHSI, and Magellan behavioral health services. We estimate that 79% of these individuals were funded by CBH or BHSI.

Specifically, the Northeast location received intake, reinstatement, or screening requests from **402 individuals**. Of these, 288 individuals (73%) were admitted into the program. Quarterly data shows an average of 98 admissions inquiries, resulting in 75 completed admissions per quarter.

The facility's overall retention rate was **63%**, a positive increase from the previous year. However, patient retention remains challenging since the pandemic. We've observed several concerning trends, including a higher rate of missed scheduled dosing, increased requests for reinstatements, and a rise in "Absent Without Leave" (AWOL) statuses, which makes follow-up difficult.

Interestingly, transitioning from a seven-day-a-week schedule to a **six-day schedule** appears to have improved retention, likely by reducing transportation barriers for patients.

#### Lansdowne Office: Consistent Demand and Improved Retention

The Lansdowne office served approximately **305 individuals** in 2024. Funding sources included CBH, Delco Funding, CCBH, and Medicare/Medicare Advantage. We estimate that 75% of these individuals were funded by CCBH or Delaware County Funding, with the remaining 25% related to Medicare.

The Lansdowne facility received intake, reinstatement, or screening requests from **110 individuals** in 2024, with 83 individuals (75%) admitted into the program. The office averaged 30 inquiries and 20 completed admissions per quarter.

Overall, the facility calculated a retention rate of **67%**, marking an 11% improvement from the previous year. Despite this improvement, patient retention continues to be challenging since the pandemic, as we observed a higher trend of missed scheduled dosing, increased reinstatement requests, and a rise in AWOL statuses.

## Bucks County (Warminster) Office: Developing Interest and Retention Concerns

The Bucks County sites continue to generate increased interest from external consumers and providers seeking admission for treatment. In 2024, our program served approximately **217 individuals**, funded by BCDAC, Keystone, and Magellan behavioral health services. We estimate that 82% of these individuals were funded by Bucks County Magellan.

Specifically, the Warminster facility received intake, reinstatement, and screening requests from **189 individuals**, with 139 individuals (73%) admitted into the program. Quarterly data showed an average of 47 inquiries, resulting in 34 completed admissions per quarter.

The facility calculated a retention rate of **45%** for individuals treated. Similar to the other locations, patient retention has become more challenging since the pandemic, characterized by a higher trend of missed scheduled dosing, increased requests for reinstatements, and a rise in AWOL statuses.

## **Barriers to Admission**

We conducted a thorough review of admission denials to identify trends that acted as barriers to treatment enrollment.

- **Illicit Substance Use:** 30% of denials for enrollment in the MMT program were due to patients testing positive for illicit substances contraindicated for this type of program (e.g., buprenorphine, alcohol, benzodiazepines).

- **Lack of Physician Coordination:** Data also showed that some patients were unwilling to allow Soar to contact their prescribing doctor for benzodiazepines to coordinate care with our MMT program, preventing admission.
  - **Missed Appointments:** Data showed 42% of patients did not show up for their scheduled appointments. Patients who discussed their reasons for not attending cited factors such as receiving emergency take-home doses from another provider upon admission, obtaining take-homes with a medical marijuana card, or receiving a higher number of emergencies take-homes from another provider. Additionally, initial transportation to and from the facility was also cited as a barrier. A final issue noted centers on the requirement of daily program attendance and a desire for greater flexibility in treatment, such as receiving a prescription or attending fewer days per week.
  - **Funding Sources:** It is estimated that a total of 25% of the denials were associated with funding source issues at this time. Currently, there has been more inquiries with patients who have private insurances, Medicare and Medicare advantage plans. Contracts are not established for a majority of these sources resulting in denials for admissions
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## Treatment Effectiveness

Soar Corp assesses program effectiveness through an **annual review of drug monitoring reports**. We seamlessly import all urine drug screen (UDS) results daily from Ammon Lab into our **EMR system, Tower Systems**. Quarterly, we generate and analyze reports detailing positive drug screens by substance, including averages and percentages, to identify trends.

For reporting purposes, UDS results are categorized as follows:

- **Consistent:** Only the prescribed medication (methadone) was detected.
  - **No Drugs Found:** The sample was negative for all substances, including methadone.
  - **Additional Drugs:** Positive for substances other than methadone.
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## Program Growth and Screening Volume

Our programs across all locations experienced **consistent growth** in 2024 through new admissions, transfers, and assessments.

### Soar Philadelphia

The Philadelphia office collected an estimated **5,651 urine screen samples** during the 2024 calendar year. Approximately **8% (around 113)** of the quarterly UDS samples were associated with new admissions or requests for program reinstatement. Total inquiries for admission or reinstatement remained steady throughout the year, totaling **260 by year-end**.

### Soar Lansdowne

The Lansdowne office collected an estimated **2,677 urine screen samples** during the 2024 calendar year. Approximately **6% (around 40)** of the quarterly UDS samples were associated with new admissions or requests for program reinstatement. Total inquiries for admission or reinstatement remained steady throughout the year, totaling **120 by year-end**.

### Soar Warminster

The Warminster office collected an estimated **1,330 urine screen samples** during the 2024 calendar year. Approximately **9% (around 29)** of the quarterly UDS samples were associated with new admissions or requests for program reinstatement. Additionally, about **5% (around 15)** of collected samples were related to screening and assessment requests. In total, inquiries for admission, assessment, and reinstatement remained steady throughout the year, totaling **174 by year-end**.

## Trends in Existing Patient Drug Screens

Our analysis of existing patient Urine Drug Screen (UDS) trends across our offices reveals several positive developments in 2024.

## *Philadelphia Office Trends*

The Philadelphia office showed the following improvements:

- **Consistent Screening Rate:** The rate of consistent urine screens increased to 30% by the end of 2024.
- **Opiate and Fentanyl Trends:**
  - Opiate-negative urine screen results increased compared to the previous year, with the annual average rising from 60% to 66% by the close of 2024.
  - The rate of fentanyl presence decreased by 4% compared to the previous year, appearing in 25% of samples.
- **Alcohol Results:** The total percentage of negative alcohol results reached 99% for the calendar year, a notable improvement from the prior year.
- **Illicit Benzodiazepine Use:** We observed a decrease in the rate of illicit benzodiazepine use to 9% compared to the previous year.

## *Warminster Office Trends*

The Warminster office also demonstrated positive trends:

- **Consistent Screening Rate:** The rate of consistent urine screens increased to 38% (approximately 505) by the end of 2024.
- **Opiate Trends:** Opiate-negative urine screen results showed a slight decrease compared to the previous year, with the annual average adjusting from 72% to 69% by the close of 2024.
- **Alcohol Results:** The total percentage of negative alcohol results reached 97% for the calendar year.
- **Illicit Benzodiazepine Use:** We observed no significant difference in illicit benzodiazepine use, remaining stable at a total of 6%.

## *Lansdowne Office Trends*

Analysis of the Lansdowne office reveals the following developments:



- **Consistent Screening Rate:** The rate of consistent urine screens increased to 39% (approximately 1056) by the end of 2024.
- **Opiate and Fentanyl Trends:**
  - Opiate-negative urine screen results increased compared to the previous year, with the annual average rising to 71% by the close of 2024.
  - The rate of fentanyl presence decreased to 22% of samples compared to the previous year.
- **Alcohol Results:** The total percentage of negative alcohol results reached 96.5% for the calendar year, a notable decrease from the prior year.
- **Illicit Benzodiazepine Use:** We observed an increase in the rate of illicit benzodiazepine use to 4.1% compared to the previous year.

## Treatment Efficiency

At SOAR Corp Philadelphia, we are currently reviewing the overall efficiency of treatment services for the 2024 calendar year. We define "**treatment efficiency**" by two key standards:

- **Tracking Treatment Hours:** We collect monthly, quarterly, and annual data on the total treatment hours completed by our patient population, comparing this data against an established standard of "expected treatment hours."
- **Completion of Monthly Individual Sessions:** We also track, on a monthly, quarterly, and annual basis, the number of patients who failed to complete at least one individual counseling session per month.

By measuring these two standards, we aim to accurately reflect both **patient engagement** in treatment and the overall **quality of services** offered by our program.

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## Service Delivery in 2024

Service delivery remained consistent across all SOAR locations in 2024. All sites utilized group therapy, individual therapy, and introduced telehealth options exclusively for individual counseling.

However, concerns about **confidentiality** remained the biggest barrier to completing group therapy via telehealth. Patients reported mixed feelings about telehealth services, sometimes needing to end sessions early due to an inability to maintain privacy in their home environment.

## **SOAR Philadelphia**

- The average monthly patient census was **420**, a decline from the previous year.

## **SOAR Lansdowne**

- The average monthly patient census was **215**, a decline from the previous year.

## **SOAR Warminster**

- The average monthly patient census was **99**, an increase from the previous year.
- Many patients reported preferring in-person sessions with their primary counselor over telehealth options.

## **SOAR Levittown**

- The average monthly patient census was **170**, an increase from the previous year.
- Many patients reported preferring in-person sessions with their primary counselor over telehealth options.

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## **Individual and Group Therapy Outcomes in 2024**

### **Philadelphia**

- **Individual Therapy:** Patients attended a total of **5,080 hours** of individual therapy in 2024. Soar achieved an impressive **98%** rating for ensuring all patients met the minimum monthly standard

of one individual session, as required by regulations. Additionally, patients completed an estimated **97%** of the expected individual treatment hours per month, averaging **1.0 hour** of individual sessions per month.

- **Group Therapy:** Patients attended a total of **6,968 hours** in 2024. They completed an estimated **92%** of the expected group treatment hours per month, averaging **1.4 hours** of group sessions per month. This represents a **2% increase** in treatment attendance compared to the previous year.

## Warminster

- **Individual Therapy:** Patients attended a total of **1,880 hours** of individual therapy in 2024. Soar achieved an impressive **99%** rating for ensuring all patients met the minimum monthly standard of one individual session. Patients completed an estimated **37%** of the expected individual treatment hours per month, averaging **1.6 hours** of individual sessions per month.
- **Group Therapy:** Patients attended a total of **1,474 hours** in 2024. They completed an estimated **48%** of the expected group treatment hours per month, averaging **2.8 hours** of group sessions per month. In total patients attended 4.4 hours of treatment per month at this location.

## Levittown

- **Individual Therapy:** Patients attended a total of 2792 **hours** of individual therapy in 2024. Soar achieved an impressive **97%** rating for ensuring all patients met the minimum monthly standard of one individual session. Patients completed an estimated **36%** of the expected individual treatment hours per month, averaging **1.4 hours** of individual sessions per month.
- **Group Therapy:** Patients attended a total of 2556 **hours** in 2024. They completed an estimated **46%** of the expected group treatment hours per month, averaging **1.4 hours** of group sessions per month. In total treatment attendance totaled 2.8 hours a month for a patient.

## Lansdowne

- **Individual Therapy:** Patients attended a total of **2,961 hours** of individual therapy in 2024. Soar achieved an impressive **99%** rating for ensuring all patients met the minimum monthly standard of one individual session. Patients completed an estimated **29%** of the expected individual treatment hours per month, averaging **1.2 hours** of individual sessions per month.

- **Group Therapy:** Patients attended a total of **8,883 hours** in 2024. They completed an estimated **43%** of the expected group treatment hours per month, averaging **3.5 hours** of group therapy per month.
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## Impact of Take-Home Medication on Therapy Engagement

The observed reduction in individual and group attendance, coupled with a shift toward monthly engagement, appears directly linked to the increase in **take-home medication**. As patients receive larger quantities of medication, the necessity for daily or weekly visits to the clinic diminishes. This change in routine can lead to a decrease in participation in the therapeutic components of the treatment program.

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## External Sources and Reviews

In 2024, SOAR Corp underwent several reviews by outside certification and licensure bodies, demonstrating full compliance with all relevant standards.

### Regulatory and Licensure Compliance

- **PA Department of Drug and Alcohol:** All four SOAR facilities received full licensure accreditation from the Pennsylvania Department of Drug and Alcohol Programs.
- **Funding Source Reviews and Claim Audits:** Audits and reviews conducted by funding sources at each site found the corporation to be in compliance with all regulations.
- **DEA Inspection:** The Drug Enforcement Administration (DEA) completed a routine inspection of the Levittown site, finding SOAR in full compliance with all regulations.

## **Patient Satisfaction and Accreditation**

- **Consumer Satisfaction Teams (OBH):** All sites hosted external patient satisfaction reviews conducted by the Office of Behavioral Health (OBH) consumer satisfaction teams. On-site reviews cited positive feedback from members and included no recommendations for improvement.
- **CARF Accreditation:** Following an audit of the program, CARF issued a new three-year certification to SOAR Levittown.
- **Network Improvement and Accountability Collaborative (NIAC):** The Philadelphia location received a two-year accreditation from NIAC after its site visit.

## **IT System Improvements and Efficiency**

During 2024, SOAR Corp undertook significant improvement projects for our IT systems, encompassing hardware, software, and network capabilities. These upgrades were implemented to enhance our virtual service capabilities, ensuring uninterrupted care for our patients. While some IT needs identified for 2024 were only partially completed due to this shift, they will be prioritized for completion in 2025.

## **Electronic Medical Records (EMR) System Enhancements**

SOAR Corp completed its full transition to the **Tower Systems EMR database** as of June 2022, establishing a paperless environment. Throughout 2024, further modifications were made to increase the system's efficiency and effectiveness.

The Regional Director collaborated with the vendor to implement several key system changes:

- **Developed a comprehensive bio-psychosocial assessment.**
- **Modified treatment plans** to include ASAM (American Society of Addiction Medicine) summaries.
- **Introduced new report and tracking systems.**

These new systems reduce the administrative workload for clinical staff and enable the use of a tracking system to ensure that treatment plans, documents, and conferences are signed and completed by staff.

## Server Infrastructure Upgrades

The IT vendor assessed the EMR system servers at all four locations and recommended immediate replacement and upgrades to increase efficiency and meet current demand.

In 2024, approval was secured to replace the server in the Philadelphia office. A virtual setup was developed in collaboration with the EMR vendor, which can now be replicated and utilized to replace the systems at the other locations. Approval and replacement of the servers located in the Lansdowne, Levittown and Warminster office have been postponed by the board.

## Data Management and Network Optimization

To improve data speed and transmission, our IT vendor redeveloped and reorganized the Distributed File System (DFS). This effort ensured instant mirroring across all sites by reformatting group shares on the agency's multiple servers into a single hierarchical system.

However, issues remain at two locations:

- The DFS hardware in the **Levittown office** is outdated and beginning to fail.
- The DFS in **Lansdowne** has also been recommended for replacement to improve system efficiency at that location.

Recommendations for the replacement and software updates for these units have been submitted to the Board of Directors and are awaiting approval from the IT vendor to proceed with installation.

## Equipment Upgrades and Technology Gaps

SOAR invested in the purchase of **10 new computers** in 2024. These units were used to replace outdated hardware at nursing and dispensing stations, front desk and check-in areas, and specific counseling offices.

Additionally, 60% computers were upgraded to **Solid State Drives (SSDs)** to significantly increase processing speeds and improve network response times. Despite these upgrades, many computers within the agency still lack integrated audio and camera capabilities. This prevents the use of telehealth options and limits participation in virtual training sessions.

Recommendations to enhance audio and video capabilities for these monitors and computers have been submitted to the Board and CEO. These upgrades would allow for the effective utilization of telehealth services and virtual provider meetings. Recommendations include upgrading to video conferencing/Think Vision monitors and purchasing new computers with integrated audio. All these recommendations are currently awaiting approval.

## Development of a Virtual Environment

Our IT vendor has been working to create a virtual environment that would allow users to access their desktops from any SOAR Corp location. Limited progress has been achieved on this goal, primarily because many of the EMR servers are localized rather than part of a centralized network, which restricts external access.

### Current Remote Access Limitations:

- The IT vendor currently uses an "AnyDesk application" for remote access sessions and virtual support. However, this application is not encrypted, and some funding sources have expressed that they cannot utilize the remote access system due to encryption and security concerns.
- Staff currently lacks the ability to work from home or utilize a hybrid schedule, and cannot access data remotely due to the limitations in the virtual environment's development.

The concept of hybrid scheduling is not currently supported by the board, which has impacted the allocation of resources for this initiative. Recommendations have been submitted for creating a robust virtual environment, including:

- The purchase of Microsoft Teams licenses.
- The development of dedicated work-from-home systems.
- The ability for a user's desktop to be virtualized, rather than tied to a hard/local computer within an office.

## Financial Health and Expenditures (2024)

The financial health of SOAR Corp and its individual sites was examined in 2024. The corporation generated a total operating revenue of **\$6,600,000** from the operation of its four facilities during the year. The corporation incurred several key expenses related to investments in infrastructure, security, and facility upgrades:

### Operational and Staffing Expenses:

- **Staffing:** Additional staff were hired, including an additional Medical Doctor (MD).
- **Community Resource Center:** Significant expenses were incurred for the construction and establishment of a new community resources center, including rent, construction costs, staff, and computers.

### IT and Infrastructure Upgrades:

- **IT and Networking:** Expenses were allocated for computer and infrastructure upgrades to enhance efficiency and effectiveness of service delivery.

- **Hardware:** Costs were generated for addressing specific computer and networking issues.

## Security and Physical Plant Improvements:

- **Physical Upgrades:** Expenses were incurred for improvements to the physical plants to increase safety. This included upgrades such as external lighting, new internal LED lighting, updated locks and self-locking doors, camera and security monitoring systems, and other mechanical improvements.
- **Cosmetic Upgrades:** Additional expenses were generated for cosmetic enhancements, including new furniture, lobby repainting, and decor.

## Community Engagement and Outreach

During 2024, SOAR significantly increased its involvement in the recovery communities of Bucks County, Delaware County, and Philadelphia County, while also providing education to outside agencies. The organization prioritized generating community inclusion for its members through the following key efforts

### Overdose Awareness and Prevention

In 2024, SOAR Corp was an active participant in overdose awareness and prevention efforts across all facilities and within the surrounding communities. SOAR Corp collaborated with the Offices of Behavioral Health in Philadelphia, Delaware, and Bucks counties to serve as a key point of contact for the distribution of Narcan rescue kits.

Working with DDAP (Pennsylvania Department of Drug and Alcohol Programs) and the DOH (Department of Health), SOAR provided essential resources to both patients and the wider community. New grant opportunities enabled the organization to procure and distribute wound care kits, sharps containers, and additional Narcan kits. SOAR Corp successfully applied for these resources, was awarded the grants, and distributed the supplies to community members and patients through its facilities. SOAR's medical providers, including doctors and nurses, offered education on the proper use of both wound care kits and Narcan kits to anyone who requested the materials.



**SOAR Board of Directors**

Mark Shvartsburd

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