



SOAR CORP
RECOVERY CENTERS

SOAR CORP RECOVERY CENTER
Annual Report For 2025

Available to the general public at

<https://www.soarcorp.org>

Program Overview: SOAR CORP

SOAR CORP is an outpatient substance use disorder treatment center with locations in Lansdowne, Philadelphia, Warminster, and Levittown, Pennsylvania. Our mission is to provide comprehensive, holistic, and highly individualized outpatient services to support individuals navigating the complexities of addiction.

Mission Statement

SOAR CORP employs a multidisciplinary, evidence-based approach to deliver comprehensive treatment for individuals navigating opioid use disorder. We are dedicated to fostering a safe, nonjudgmental environment that empowers individuals to achieve lasting recovery and enhance their overall well-being.

Vision Statement

Our vision is to provide compassionate, high-quality, and innovative harm-reduction strategies and supportive care that address the multifaceted needs of individuals affected by substance use disorders. We are committed to offering treatment in a respectful, therapeutic, and safe environment, encouraging individuals to improve their quality of life and embrace a positive lifestyle. Ultimately, we aim to help individuals achieve sustained recovery and lead fulfilling lives, thereby mitigating the detrimental impact of addiction on families and the broader community.

Corporate Core Values

- **Person in Recovery:** We are committed to providing a safe, welcoming environment where patients are treated with absolute respect. Through a collaborative, person-centered approach, we empower individuals to take responsibility for and control of their unique recovery journey.
- **Stakeholders:** We are dedicated to providing accessible, high-quality Medication-Assisted Treatment (MAT) and comprehensive care as a critical clinical intervention for individuals in need.
- **Employees:** SOAR CORP is committed to providing continuous training and professional education for our staff to ensure the delivery of cutting-edge, evidence-based care. Our multidisciplinary team is expected to actively engage in these learning opportunities to drive clinical excellence.
- **Community:** As a responsible community partner, SOAR CORP strives to be an exemplary neighbor by providing accessible, professional opioid replacement therapy. We are committed to delivering direct treatment to those affected by addiction while providing outreach, support, and education to the wider community.

- **Quality:** We maintain rigorous standards of operational efficiency, patient satisfaction, clinical effectiveness, and accessibility to ensure the delivery of exceptional patient care.

Treatment Approach Core Values

- **Integrity:** We uphold the highest standards of ethical conduct, transparency, and clinical responsibility in all interactions with our clients and colleagues.
- **Diversity:** We celebrate the unique differences of all individuals and affirm their inherent right to respect, dignity, fairness, and equality.
- **Teamwork:** We embrace collaborative, interdisciplinary efforts to achieve our shared clinical and organizational objectives.
- **Lifelong Learning:** We view organizational and clinical change as a valuable opportunity to acquire new knowledge, refine evidence-based skills, and improve patient outcomes.
- **Person-Centered Care:** We recognize that every recovery experience is unique; therefore, we provide highly individualized treatment tailored to each person's specific clinical and personal needs.
- **Stewardship:** We serve as a dedicated, responsible community resource, focused on promoting public health education and reducing the stigma of substance use disorders.
- **Peer and Family Support:** We actively encourage family involvement and integrate on-site Certified Recovery Specialists (CRS) and Peer Specialists to enhance and sustain the recovery process.

Clinical Philosophy & Treatment Approach

Our program is strategically designed to assist individuals in recovery by helping them evaluate their lifestyles, develop adaptive decision-making skills, and prioritize long-term recovery within a safe, supportive, and transformative environment.

Medication-Assisted Treatment (MAT)

SOAR CORP is a dedicated Medication-Assisted Treatment (MAT) provider. We believe that outpatient treatment is a highly effective mechanism for assisting individuals in achieving recovery and reintegrating as productive members of society. We utilize evidence-based medications, such as methadone, for detoxification and maintenance purposes to safely mitigate withdrawal symptoms and cravings.

Multidisciplinary Team Approach

We operate under a Person-Served, Multidisciplinary Team Approach to deliver holistic care that balances physical, mental, emotional, and spiritual stability. We are committed to treating every individual with deep respect and dignity, actively incorporating their personal goals and lifestyle choices into the individualized treatment planning process.

Individualized & Integrated Care

At SOAR CORP, person-first individualized treatment plans support personal growth, autonomy, and long-term development. Members are encouraged to be active participants in their recovery by collaborating directly with their clinical team.

To promote holistic community reintegration, we connect and educate members regarding local resources, including:

- Vocational, employment, and educational opportunities
- Local library and community programs
- Faith-based or religious organizations
- 12-step groups and alternative sober support networks

Family involvement is heavily prioritized, and primary counselors readily facilitate couples or family therapy sessions upon a member's request to repair and strengthen supportive networks.

Staffing & Clinical Services

Our multidisciplinary Treatment Team consists of highly trained, credentialed professionals dedicated to delivering exceptional care. The team includes Bachelor- and Master-level Counselors, Licensed Nurses, Medical Doctors (MDs), Advanced Practice Registered Nurses (APRNs), and Certified Recovery Specialists (CRS).

Our clinical staff possesses specialized expertise in:

- Addiction and Substance Use Disorders
- Co-Occurring Disorders (Dual Diagnosis)
- Trauma-Informed Care
- Marriage and Family Counseling

Multiple team members hold professional licensures and certifications, including Licensed Professional Counselors (**LPC**), Licensed Clinical Social Workers (**LCSW**), and Certified Alcohol and Drug Counselors (**CADC**).

Program Structure & Staffing Distribution

Full-time clinical and nursing staff maintains standard 40-hour work weeks. Personnel are strategically distributed across our four locations to optimize operational efficiency and patient care:

Personnel Distribution by Location

- **Philadelphia:** 11 Counselors, 1 Intake Coordinator, 1 Clinical Supervisor, and 1 Program Director
- **Lansdowne:** 5 Counselors, 1 Intake Coordinator, and 1 Program Director
- **Levittown:** 4 Counselors, 1 Intake Coordinator, and 1 Program Director
- **Warminster:** 3 Counselors, 1 Intake Coordinator, and 1 Program Director

Staff-to-Patient Ratios

To ensure high-quality, attentive care and maintain compliance with regulatory guidelines, SOAR CORP enforces strict caseload caps:

Role	Target Ratio	Maximum Cap	Schedule / Service Standard
Outpatient Counselors	30:1 (Preferred)	35:1-DDAP Regulation)	40 hours per week
Dispensing Nurses	—	1 Full-Time Nurse per 200 Patients -(DDAP Regulation)	40 hours per week
Medical Staff (MD / APRN)	—	1 MD hour of service per 10 Patients -(DDAP Regulation)	2 Full-Time MDs and 1 Full-Time APRN; maintaining a standard of 1 hour of medical service per patient as clinically indicated.

Evidence-Based Practices & Educational Services

To provide the highest clinical efficacy, SOAR CORP integrates several cores Evidence-Based Practices (EBPs) into the programming at all facilities:

- **The Matrix Model:** A structured framework for treating stimulant and substance use disorders.
- **Illness Management and Recovery (IMR):** Empowering individuals to manage their symptoms and achieve personal recovery goals.
- **Trauma-Informed Care (TIC):** Ensuring a culture of safety, empowerment, and healing that recognizes the widespread impact of trauma.

Additionally, individual clinical staff members have completed formal certification and training in specialized modalities, including Cognitive Behavioral Therapy (CBT) and Eye Movement Desensitization and Reprocessing (EMDR). SOAR CORP actively encourages and sponsors continuous professional development and advanced EBP certifications to meet the evolving needs of our population.

Health & Wellness Educational Programming

Delivered through both individual therapy and structured group sessions, we provide comprehensive education on vital health and life skills topics, including:

- Relapse Prevention and Triggers
- Infectious Disease Education (HIV/AIDS, Hepatitis C, and STDs)
- Essential Life Skills Development
- Vocational, Employment, and Educational Resources

Quality Assurance

Enhancing Treatment Accessibility

Accessibility refers to how efficiently and effectively individuals can obtain clinical services. At SOAR, the barrier-to-entry is minimized through a streamlined, three-step admission process:

[Step 1: Initial Contact] → (Web, Social Media, Phone)	[Step 2: UDS Screening] → (Urine Drug Screen)	[Step 3: Intake & Induction] (Clinical Admission)
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Clinical Indicators & Accessibility Metrics

To evaluate and continuously improve accessibility, the Quality Improvement (QI) Committee tracks and analyzes seven key clinical indicators. Data is extracted directly from the Electronic Medical Records (EMR) system and maintained via written reports and structured Excel matrices.

1. Volume & Conversion Metrics

- **Intake Requests:** Documenting the total number of individuals requesting care.
 - *Data Source:* EMR Preadmission Report (Aggregated monthly, quarterly, and annually).
- **Admissions:** Tracking the total number of individuals successfully enrolled into the program.
 - *Data Source:* EMR Admission Report (Aggregated monthly, quarterly, and annually).
- **Admission Rate:** Calculating the percentage of admitted individuals relative to total intake requests.

2. Operational & Referral Tracking

- **Admission Sources:** Recording the primary referral or funding origin for each intake request. Frequency distributions are calculated monthly, quarterly, and annually to analyze demographic shifts and community outreach efficacy.
- **Extended Admissions:** Tracking and documenting all instances where an intake and induction process exceeds our established **24-hour clinical threshold**. Delays are reviewed monthly, quarterly, and annually to identify operational bottlenecks.

3. Barrier Mitigation & Compliance

- **Admission Denial Trends:** Documenting and categorizing the specific clinical or behavioral reasons for an admission denial (e.g., active alcohol intoxication, intake no-shows, acute benzodiazepine use).
 - *QI Action:* The QI Committee analyzes these trends to build targeted action plans and barrier-reduction strategies.
 - **Data Review Protocol:** The QI team conducts comprehensive quarterly and annual data reviews. This ongoing analysis yields formal, data-driven recommendations for process improvement, keeping SOAR Philadelphia aligned with the highest standards of care.
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Sustained Demand & Census Growth (2025)

Throughout 2025, SOAR Philadelphia experienced a steady volume of treatment inquiries from both prospective patients and regional funding partners. The facility maintained an active and stable footprint, serving an average of approximately **530 unique individuals each quarter**.

Year-Over-Year Census Acceleration

The program achieved substantial net growth over the course of the fiscal year. The active patient census expanded from **420 individuals at the close of the 2024 calendar year to 530 individuals by the close of 2025**, representing a strong **26.2% increase** in our overall treatment capacity and community reach.

Payer Mix & Referral Evolution

While funding spans a diverse array of managed care organizations—including Community Behavioral Health (CBH), Behavioral Health Special Initiative (BHSI), Medicare, Medicare Advantage, and Magellan Behavioral Health—**CBH remains our primary partner, funding an estimated 79% of our census**. However, 2025 marked an accelerating trend in commercial and federal lines of business, characterized by a substantial increase in Medicare and Independence Blue Cross commercial plan referrals.

Intake Pipeline Efficiency

Specifically, **406 individuals** requested an initial intake, reinstatement, or clinical screening at our Philadelphia facility in 2025. Out of these inquiries, **359 individuals were successfully admitted**, demonstrating a strong clinical conversion rate.

Period	Average Inquiries	Completed Admissions	Conversion Rate
Quarterly Average	98	89	~91%
Annual Total	406	359	88%

Referral & Admission Trends

An analysis of our 2025 intake data highlights distinct shifts in candidate profiles and referral partner engagement:

- **Clinical Presentation:** A significant portion of incoming admission requests originated from individuals not currently connected to a care network that were actively using illicit substances at the time of intake.
- **Existing Network Activity:** Traditional inpatient residential and community referral streams remained active, including partners such as Kirkbride Center, Aldie Counseling Center, CBH, Bucks County Single County Authority (SCA), and local hospital emergency departments.
- **Strategic Growth Needs:** Several legacy institutional referral sources demonstrated a downward trend in 2025. This contraction highlights a critical strategic need to cultivate new outreach pipelines and aggressively explore emerging commercial payer networks.
- **Provider Transfers:** The facility noted a continuous volume of requests from active patients seeking transfers to alternative local Methadone Maintenance Treatment (MMT) providers, which is being monitored for quality assurance.

Patient Retention Analysis

Improved Retention Outcomes

SOAR Philadelphia achieved an overall **patient retention rate of 88%** for the 2025 calendar year. This represents a statistically significant, positive increase compared to 2024 performance metrics.

Ongoing Post-Pandemic Challenges

Despite this net growth, long-term patient engagement continues to face persistent headwinds that have intensified in the post-pandemic landscape. The clinical team notes a rising trend in the following areas:

- **Dosing Non-Compliance:** An increased frequency of missed scheduled medication doses.
- **Administrative Fractures:** A rise in "Absent without Leave" (AWOL) discharges, which severely complicates clinical outreach and continuity-of-care follow-up.
- **Reinstatement Volatility:** A higher volume of requests for administrative or clinical reinstatements following a treatment lapse.

Strategic Schedule Optimization

Key Operational Insight: In response to documented patient transit challenges, the facility successfully transitioned from a seven-day operational schedule to a **six-day weekly schedule**. Data indicates this

operational shift successfully mitigated major transportation barriers for our population, serving as a primary driver behind our improved 2025 retention metrics.

Analysis of Admission Denials & Barriers to Treatment

To identify and systematically mitigate barriers to care, a thorough retrospective review of admission denials was conducted. The analysis revealed that denials are primarily driven by clinical contraindications, appointment non-attendance, and gaps in commercial insurance contracting.

1. Missed Appointments & Operational Friction (52% of Denials)

The largest single barrier to successful enrollment was intake non-attendance, with **52% of prospective patients failing to show up** for their scheduled admission appointments. Follow-up discussions with individuals who missed their appointments revealed several key underlying factors:

- **Competing Provider Advantages:** Patients frequently cited choosing alternative local programs that offered immediate take-home doses upon admission or provided a higher initial volume of take-home medications.
- **Medical Marijuana Accommodations:** Some individuals opted for competing facilities that offered specialized take-home flexibilities for patients possessing a valid Medical Marijuana Card.
- **Transportation Realities:** Reliable transit to and from the outpatient facility during the initial intake window remains a major logistical hurdle for incoming candidates.
- **Scheduling Rigidities:** The standard requirement for daily, on-site program attendance conflicts with patient desires for treatment flexibility, such as reduced weekly attendance schedules and reduced or no attendance to counseling sessions.

2. Clinical Contraindications & Illicit Substance Use (41% of Denials)

Active substance use accounted for **41% of all program admission denials**. These cases involved individuals testing positive for substances that are clinically contraindicated with Methadone Maintenance Treatment (MMT) protocols without strict medical oversight:

- **High-Risk Interactions:** Acute concurrent use of alcohol, benzodiazepines, or conflicting partial agonists like Buprenorphine.

3. Lack of Prescriber Care Coordination

A distinct subset of clinical denials stemmed from a breakdown in care coordination. A number of prospective patients on prescribed benzodiazepine regimens were unwilling to sign release-of-information forms allowing SOAR CORP medical staff to contact their treating physician. Without this vital cross-provider clinical coordination, safe MMT admission could not be authorized.

4. Payer Source & Contracting Limitations (5% of Denials)

Insurance and financial issues accounted for approximately **5% of total admission denials**.

- **The Commercial & Federal Gap:** SOAR CORP has experienced a noticeable surge in treatment inquiries from individuals covered by private commercial insurance and Medicare Advantage plans. Because formal provider contracts are not yet fully established with the majority of these managed care organizations, the facility was forced to issue administrative denials based on out-of-network status.

External Sources and Reviews

In 2025, 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.

Information and Technology

Electronic Medical Records (EMR) System Enhancements

SOAR CORP achieved a fully paperless environment following its transition to the **Tower Systems EMR database** in June 2022. Throughout 2025, the Regional Director collaborated closely with the software vendor to implement several key modifications to maximize system efficiency, reduce administrative burdens on clinical staff, and streamline compliance tracking:

- **Lab Integration:** Developed a comprehensive interface to directly import laboratory results and toxicology drug screens into patient EMR profiles.
- **Clinical Compliance:** Modified digital treatment plans to directly integrate American Society of Addiction Medicine (ASAM) clinical summaries.
- **Performance Tracking:** Introduced advanced reporting modules to ensure all treatment plans, clinical documentation, and case conferences are electronically signed and completed within regulatory timeframes.
- **Billing Optimization:** Built an interface linking the EMR directly to the Billing Clearinghouse, enabling **100% electronic billing file submission** across all funding sources.

Infrastructure, Data Management, & Network Optimization

Server Infrastructure Upgrades

Following a comprehensive assessment, our IT vendor recommended the immediate replacement and upgrading of EMR servers across all four locations to handle increased operational demands.

- **Philadelphia:** Capital approval was secured in 2025 to replace the primary server. A virtualized architecture was successfully developed in collaboration with the EMR vendor. This setup now serves as the blueprint for our remaining locations.
- **Lansdowne:** Server approval and physical replacement were completed in early 2026.
- **Levittown & Warminster:** Hardware deployments were postponed by the Board of Directors and are now slated for completion in 2026.

Data Management & Network Optimization

To improve data transmission speeds and file security, the IT vendor reorganized our **Distributed File System (DFS)**. This reformatted localized group shares across multiple servers into a single, cohesive hierarchical system, allowing for instant file mirroring across all sites.

However, critical hardware vulnerabilities remain at two locations:

- **Levittown:** The localized DFS hardware is outdated, near end-of-life, and experiencing intermittent failures. Replacement is scheduled for 2026.
- **Lansdowne:** The IT vendor has recommended a hardware replacement to restore optimal local network efficiency in 2026.

Status: Detailed procurement and software update recommendations for these units have been submitted to the Board of Directors and are awaiting final vendor clearance to proceed with installation.

Equipment Upgrades & Technology Gaps

In 2025, SOAR CORP invested in **10 new workstation computers** to replace obsolete units at nursing/dispensing stations, front desk check-in areas, and targeted counseling offices. Additionally, **30% of existing computers** were retrofitted with Solid State Drives (SSDs) to dramatically increase processing speeds and network response times.

Despite these physical hardware improvements, significant technology gaps persist:

Identified Deficiency	Operational Impact	Proposed Solution	Status
Lack of Integrated Audio & Camera Capabilities	Prevents deployment of outpatient tele-health options; restricts staff from participating in mandatory virtual professional development trainings.	Upgrade to video-conferencing/Think Vision monitors; purchase modern workstations with integrated audio/video components.	Awaiting CEO & Board Approval

Virtual Environment Development & Remote Access

The IT vendor continues to design a unified virtual environment to allow staff to seamlessly access their secure desktops from any SOAR CORP facility. Progress has been limited due to the decentralized, localized nature of our current EMR server architecture.

Current Remote Access Security Risks:

- **Unencrypted Traffic:** Remote IT support and virtual sessions currently rely on the *Any Desk* application. Because this application lacks enterprise-grade encryption, several primary funding sources have flagged security concerns and cannot fully utilize our remote systems.
- **Work-from-Home (WFH) Limitations:** Due to these network and security limitations, personnel currently lack the capability to securely access corporate data remotely or utilize hybrid work schedules.

Note: The Board of Directors does not currently support a hybrid scheduling framework, which has limited the allocation of capital resources toward this specific initiative.

Pending Recommendations:

To build a compliant, robust virtual workspace, the following recommendations are currently pending board approval:

1. Procurement of enterprise **Microsoft Teams** licensing.
2. Development of dedicated, secure work-from-home infrastructure.
3. Transition from hardware-tied local workstations to a fully **virtualized desktop infrastructure (VDI)**.

Cyber security & IT Vulnerability Assessment

Antivirus & Threat Protection

By the close of 2025, the IT department initiated a phased transition to **Windows Defender** as the primary, centralized antivirus shield for all corporate workstations, configured for daily threat scans and monthly updates.

While enterprise-wide spam and ad-blocking protections were recommended, implementation was postponed during the 2025 calendar year. Because the full transition to Windows Defender was deferred to 2026 by the Board and the IT Manager, the IT department continues to manually deploy after-hours

network configurations to maintain updated **McAfee Antivirus** software definitions across all active endpoints.

2026 Security Vulnerability Action Plan

To safeguard sensitive corporate data and maintain rigorous healthcare compliance, a thorough security assessment will focus on four core pillars:

- **Legacy Software Mitigation:** Comprehensive auditing of all applications and operating systems no longer supported by vendors or missing critical patches (with specific emphasis on legacy Adobe products, antivirus programs, and system utility software).
- **Wireless Network Hardening:** Evaluation of active Wi-Fi security protocols across all outpatient clinics to identify and eliminate easily compromised legacy protocols (such as WEP or outdated WPA standards) in favor of enterprise-grade WPA3.
- **Perimeter & Network Controls:** A formal review of existing hardware firewalls, intrusion detection/prevention systems (IDS/IPS), and reactive security measures.
- **Data Loss Prevention (DLP):** Assessment of organizational measures safeguarding protected health information (PHI) and corporate data, analyzing end-to-end encryption, strict user access controls, and data loss mitigation strategies.

Financial Health & Capital Expenditures

In 2025, a comprehensive financial evaluation was conducted to assess the fiscal health and operational sustainability of SOAR CORP and its individual clinic sites. During the fiscal year, the corporation generated total **operating revenue of \$7,000,000** across its four outpatient facilities.

To drive long-term clinical excellence, regulatory compliance, and patient safety, the corporation reinvested its revenue into several key capital improvement projects:

1. Personnel & Operational Capital

- **Medical Staffing Expansion:** Capital was allocated to expand our medical provider network, including the on boarding of an additional full-time Medical Doctor (MD) to meet growing patient volume.
- **Community Resource Center:** Significant capital expenditures were directed toward the construction and operational establishment of a new Community Resource Center. Disbursed funds covered leasing agreements, physical construction costs, dedicated staffing, and specialized workstation hardware.

2. Information Technology & Network Infrastructure

- **System Modernization:** Operational funds were strategically allocated to computer hardware and structural network upgrades to enhance data speed, clinical documentation efficiency, and service delivery.
- **Hardware Remediation:** Targeted funds were deployed to remediate critical localized computing issues and failing network storage units across multiple clinics.

3. Security, Safety, & Physical Plant Enhancements

To maximize facility safety and create a highly therapeutic, compliant environment, the corporation funded substantial physical plant upgrades:

Upgrade Category	Specific Improvements Implemented
Physical & Biological Security	Installed advanced external security lighting, updated commercial lock systems, deployed electronic self-locking doors, and integrated comprehensive CCTV camera and security monitoring systems.
Environmental & Efficiency	Replaced legacy lighting with high-efficiency internal LED systems and executed necessary mechanical and HVAC improvements.
Therapeutic Environment	Executed cosmetic enhancements across clinic common spaces, including full lobby repainting, contemporary clinical decor, and the procurement of durable healthcare-upgrade furniture.

Community Engagement, Outreach, & Public Health

During 2025, SOAR CORP significantly deepened its clinical and educational integration within the recovery networks of Bucks, Delaware, and Philadelphia counties. The organization prioritized public health integration, reduction of stigmas, and patient advocacy through the following key initiatives:

Overdose Awareness & Harm-Reduction Mobilization

SOAR CORP served as an active, leading participant in overdose awareness and harm-reduction efforts across all regional catchment areas.

- **County Inter-Agency Collaboration:** Partnering with the Offices of Behavioral Health in Philadelphia, Delaware, and Bucks counties, SOAR CORP acted as a primary distribution hub for enterprise Narcan (naloxone) rescue kits.
- **State-Level Grant Optimization:** Working in lockstep with the Pennsylvania Department of Drug and Alcohol Programs (**DDAP**) and the Department of Health (**DOH**), SOAR CORP successfully secured vital public health grants.
- **Critical Resource Distribution:** These state grants funded the procurement and community-wide deployment of:
 - Naloxone (Narcan) rescue kits
 - Medical wound-care kits (specifically targeting complex skin issues associated with modern illicit drug supply)
 - Safe sharps disposal containers
- **Clinical Education:** To ensure the safety and efficacy of these materials, SOAR CORP's medical staff—including our physicians and dispensing nurses—provided direct, on-demand medical education to patients, families, and community stakeholders regarding proper wound-care management and reversing opioid overdoses.

SOAR Board of Directors

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