Recovery Care

Predictive peer support and virtual clinical care for SUD populations

We see relapse risk the day it changes. Your claims see it months later.

Sober Sidekick is a 1.5M-member recovery community with a live behavioral signal on every member, wired directly into licensed clinical care. We identify rising risk in real time and act on it before the ED visit, the readmission, or the repeat residential stay. **Fewer relapses, lower total cost of care, and a member who stays engaged through the setbacks.**

1.5M+	48.2%	$4,442	90%
Platform members	Relapse reduction among engaged members	Avoided cost per engaged member, per year	Return to the community after a reported relapse

THE WINDOW YOUR DATA DOES NOT HAVE

Same event, two timelines.

HOW THE SYSTEM SEES IT TODAY

The relapse happens. No data exists anywhere.	The member shows up in the ED, an admission, or a readmission.	The claim is filed, adjudicated and paid.	It surfaces in your reporting.	**Months later** After the money is spent.

THE WINDOW TO INTERVENE Where the episode can still be prevented, and where Recovery Care goes to work.

WHAT SOBER SIDEKICK SEES

Engagement drops, or daily check-ins are missed.	The member's risk score updates in real time.	A smart alert routes to our clinical team.	Outreach, counseling and a plan.	**Same day** Before the adverse event.

THE ECONOMICS ARE ALREADY DOCUMENTED

Independently modeled and certified, not our own math.

HMA & WAKELY · SUD VALUE SPECTRUM

3.6 : 1

Low-value SUD spend, ED, detox and repeat residential, outpaces high-value spend on MAT, peer support and case management.

GLIDEPATH OPPORTUNITY

$2M

Savings per 1,000 members as spend shifts from lowest and low-value care toward high and highest-value care.

CHARM ECONOMICS · VALIDATION INSTITUTE CERTIFIED

$4.4M

Avoided relapse cost per 1,000 actively engaged members, annualized. Members average 1.7 relapses a year at $6,244 per episode.

Sources. HMA & Wakely spectrum of SUD utilization value, built off the 2023 ACA database. Charm Economics Prevention-to-ROI model, certified by the Validation Institute; the 48.2% relapse reduction and $4,442 per-member figure derive from a single peer interaction as the baseline, so additional engagement drives higher savings. Full methodology and the underlying workbooks are available to your actuarial team on request.

MEMBERS ALREADY TRUST IT

Earned organically, before a dollar of plan investment.

4.8	8,000+
App Store rating	Member reviews

"This app has definitely turned my life around... I know that I am no longer alone."

"My recovery has been an amazing journey. Sober Sidekick has helped me manage through my sobriety and find other people just like me, especially during my hard times."

SOBER SIDEKICK MEMBERS

Three things a person in recovery needs. Today they live in three different places.

Someone to turn to in the moment. An expert care team the day they are ready, not six weeks later. And support that lasts longer than an episode. We built all three into the phone the member already carries.

OUR THREE SUCCESS DRIVERS

01 IN THE MOMENT

Someone to turn to

The moments that matter are at 10:30 at night, not 10:30 in the morning.

- 24/7 peer community, no appointment or referral
- Every post gets a reply, around the clock
- Multi-substance sober timer and daily check-ins
- No member has ever gone without support

SOBER SIDEKICK

02 WHEN THEY ARE READY

An expert care team

Activation does not wait for a waitlist to clear.

- Licensed clinicians, virtual, in the app they already have
- Relapse-prevention counseling against the member's own high-risk scenarios
- Recovery plan that lives in the member's hand
- Medical cost-driver sweep, with findings routed for follow-up

RECOVERY CARE

03 FOR AS LONG AS IT TAKES

Ongoing support

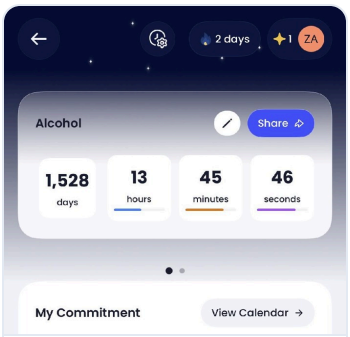
Recovery is longitudinal. The system treats it as an episode.

- Pulse self-check between visits, five minutes, anonymous
- Momentum and recovery capital scores the care team can act on
- 24/7 virtual AA and NA meetings from the phone
- Your plan benefits surfaced where the member actually looks

CONTINUOUS

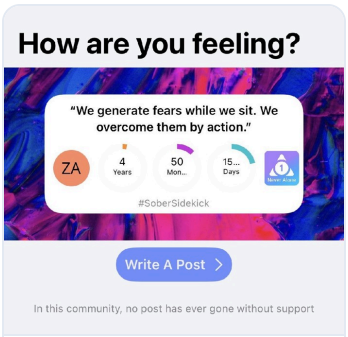
LIVE IN THE MEMBER'S HAND TODAY

No appointment, no referral, no waiting room.



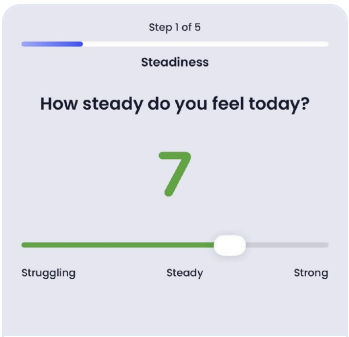
Multi-substance sober timer

Alcohol, nicotine, gambling, drugs, food, gaming, or anything they name themselves.



One tap to ask for help

A guided composer, so reaching out does not require the right words. Peers reply in minutes.



Pulse self-check

Five minutes, anonymous. Mood, cravings, sleep, stress, and connection.

Momentum and recovery capital

Every check-in returns an action plan and scores the care team can act on.

PREDICT, PREVENT, ENGAGE

Every signal routes into a clinical action.

Continuous scoring on the largest relapse dataset in recovery.

Behavioral and social signals, read daily across 1.5M+ members. Acuity is not fixed; engagement moves members down the stack.

HIGH RISK

Smart alert routes to the clinical team. Proactive outreach and a plan the same day.

RISING RISK

Converted into Recovery Care before the trajectory turns into an event.

STABLE

Held in the peer community, monitored continuously, re-engaged after any setback.

How the Program Works and Contracts

Virtual peer + clinical recovery, furnished through Empathy Health Providers PC

Peer-powered, clinically anchored recovery.

Sober Sidekick delivers always-on peer support at scale. Clinical services are furnished and billed through **Empathy Health Providers PC** under a monthly, per-member recovery model. Turnkey, with no plan build required.

THREE WAYS WE ENGAGE YOUR MEMBERS

Every path lands in the same clinician-led, peer-supported model.

Gap closure & event follow-up

Annual wellness, prenatal and postpartum, ER and hospital discharge follow-up. The qualifying visit closes the care gap and starts treatment.

E/M (9920x) + G2086 in Month 1

Sober Sidekick app conversion

Members already active in the recovery community convert directly into clinical care, flagged by rising-risk predictive indicators. No qualifying visit needed.

G2086, no E/M

Residential rehab discharge

Step-down follow-up after a residential stay keeps members supported through the highest-risk weeks of early recovery.

G2086, no E/M

THE CARE JOURNEY

Month 1 · Initiation — 70+ min

Individualized treatment plan and recovery care planning, with at least 70 minutes of services in the first calendar month.

- **Individualized treatment plan and care planning**
- **Relapse-prevention counseling**
- **Care coordination and SDoH support**
- **Medical cost-driver review**

→

Months 2-6 · Ongoing — 60+ min / mo

M2 M3 M4 M5 M6

Monthly relapse-prevention counseling and coordination at 60+ minutes each month. Typical engagement runs 3 to 4 months; available through Month 6.

- **Monthly counseling, monitoring, and care planning**
- **24/7 peer community and Sidekick support access**

WHY IT MATTERS

- SUD is among the costliest, most under-treated conditions in Medicaid, driving avoidable ER, inpatient, and crisis spend.
- Traditional SUD care reaches few and retains fewer. **Engagement, not capacity, is the gap.**
- Sober Sidekick already meets members where they are, turning a daily digital relationship into **measurable clinical engagement**.
- The G-code vehicle already exists in most state fee schedules and is graded high-value. It is almost entirely unused. **Nobody is driving it.**
- A simple monthly case rate lets the plan pay for the **outcomes-driving touchpoints** that keep members in recovery.

THE UNIT MATH

1.7	relapses per SUD member per year, at $6,244 per episode
48.2%	fewer reported relapses among engaged members
$4,442	avoided cost per engaged member, per year

Engagement compounds. The certified model uses a single peer interaction as its baseline.

HOW WE CONTRACT

THE MODEL

Per-member-per-month with **initiation** (Month 1) and **ongoing care** (Months 2 to 6), furnished and billed through **Empathy Health Providers PC**. Turnkey, with no plan build required.

HOW IT BILLS

A single agreed-upon case rate keeps billing simple. Billed per engaged member per month; virtual **POS 02**, **F10-F19** primary diagnosis. **G2086** in Month 1, up to five **G2087** per member per plan year. E/M billed on date of service; G-codes on the last day of the month.

WHAT'S INCLUDED

- Sober Sidekick platform license
- Licensed NPs + peer specialists
- Predictive risk stratification
- Care coordination & outreach
- 42 CFR Part 2 / HIPAA compliant
- Monthly engagement & outcomes reporting

Reduce SUD spend. Build recovery resiliency.

Let's model the opportunity against your own SUD population.

Jeff Goe, Chief Growth Officer

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