

HOW TO PAY FOR TREATMENT

- Aegis is a Medi-Cal and Medicare provider. Aegis is also an approved provider for major HMOs, PPOs, IPAs (e.g. Kaiser Permanente, Health Net, United Health, etc.) and large employer plans (e.g. Wells Fargo, Target, UC System, etc.). Over 50% of Aegis' existing patients have their treatment paid in full by Medi-Cal, Medicare, and almost all others by private insurance.
- Beginning on January 2014, the Affordable Care Act has transformed the way health care is provided and paid for in the United States that will affect all residents. These changes include:
 - The expansion of Medi-Cal eligibility to all individuals with annual income of less than \$15,856 for a single person, \$21,404 for a couple, \$32,499 for families of four, and up to \$54,689 for a family of eight. Most young adults and students in particular, would now qualify for Drug Medi-Cal coverage, and will not have to pay for treatment within Aegis.
 - California's Healthcare Exchange will require that HMOs and PPOs cover mental health and addiction treatment services as part of their essential benefit package. This means that for the first time ever, individuals enrolled in these private health insurance plans will be entitled to receive addiction treatment services at Aegis.
- Self-pay patients are eligible for a sliding scale fee schedule that is based on their ability to pay. Most Aegis patients qualify for reductions in their rates up to 50% of the published rate.
- Aegis accepts various methods of payment, including all major credit cards.

CLINIC LOCATIONS

6500 Morro Rd., # D, **Atascadero**, CA 93422 Tel: 805-461-5212
1018 21st St., **Bakersfield**, CA 93301 Tel: 661-861-9967
501 W. Columbus St., **Bakersfield**, CA 93301 Tel: 661-328-0245
590 Rio Lindo Ave., **Chico**, CA 95926 Tel: 530-345-3491
1019 Jefferson St., **Delano**, CA 93215 Tel: 661-721-0463
11041 E. Valley Blvd., **El Monte**, CA 91731 Tel: 626-442-4177
3707 E. Shields Ave., **Fresno**, CA 93726 Tel: 559-229-9040
11776 Mariposa Rd., #103, **Hesperia**, CA 92345 Tel: 760-956-2462
614 W. Manchester Blvd., #104, **Inglewood**, CA 90301 Tel: 310-412-0879
14240 E. Imperial Hwy., **La Mirada**, CA 90638 Tel: 562-946-1587
320 "H" St., #2, **Marysville**, CA 95901 Tel: 530-742-7747
1343 W. Main St., # A & B, **Merced**, CA 95340 Tel: 209-725-1060
1235 McHenry Ave., # A & B, **Modesto**, CA 95350 Tel: 209-527-4597
125 W. "F" St., #101, **Ontario**, CA 91762 Tel: 909-986-4550
2055 Saviers Rd., # A, **Oxnard**, CA 93033 Tel: 805-483-2253
1450 N. Lake Ave., #150, **Pasadena**, CA 91104 Tel: 626-794-1161
1050 N. Garey Ave., **Pomona**, CA 91767 Tel: 909-623-6391
1133 Coloma Way, # C, **Roseville**, CA 95661 Tel: 916-774-6647
4129 State St., **Santa Barbara**, CA 93110 Tel: 805-964-4795
115 E. Fesler St., **Santa Maria**, CA 93454 Tel: 805-922-6597
625 E. Main St., **Santa Paula**, CA 93060 Tel: 805-525-4669
2650 Jones Way, #10, **Simi Valley**, CA 93065 Tel: 805-522-1844
8626 Lower Sacramento Rd., #41, **Stockton**, CA 95210 Tel: 209-478-2487
1825 E. Thelborn St., **West Covina**, CA 91791 Tel: 626-915-3844
1322 N. Avalon Blvd., **Wilmington**, CA 90744 Tel: 310-513-1300

Corporate Office

7246 Remmet Ave., **Canoga Park**, CA 91303 Tel: 1-800-821-0775

To learn more about Aegis, please visit our website at www.aegistreatmentcenters.com, or call toll free number at **(800) 821-8775**.

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STRUGGLING with OPIATE ADDICTION?



WE CAN HELP!

FACTS ABOUT ADDICTION

- The most commonly used opiates and opioids include:
 - Morphine
 - Oxycodone
 - Opium
 - OxyContin
 - Pentazocine
 - Hydromorphone
 - Heroin
 - Codeine
 - Fentanyl
 - Hydrocodone
 - Propoxyphene
 - Meperidine
- Drug overdose was the leading cause of death in 2010. Among people 25 to 64 years old, drug overdose caused more deaths than motor vehicle traffic crashes [CDC, 2012].
- 25% of opiate users (including painkillers) become addicted, compared to 20% for cocaine and 10% for marijuana [CNN, 2013].
- 5.1 million people in the US are abusing prescription drugs for non-pain related reasons [NIDA, 2011].
- Nearly 3 out of every 4 prescription drug overdoses are caused by painkillers. These drugs were involved in 14,800 overdose deaths in 2008, more than cocaine and heroin combined [CDC, 2013].
- Over 900,000 teenagers begin abusing painkillers in the US every year [ADP, 2012].
- 4.2 million Americans aged 12 or older had used heroin at least once in their lives. It is estimated that 23% of individuals who use heroin become dependent on it. [NIH, 2013].
- Approximately 50% of the 2013 admissions at Aegis are under the age of 30, as compared to 10-15% a few years ago. This represents a recent dramatic shift in the patient demographic.

LET'S TALK ABOUT ADDICTION

Addiction is a type of disability, like any other physical or cognitive impairment. However, with the proper treatment, many individuals can overcome their addictions. There is no reason to be judgmental or discriminatory against individuals in recovery, but rather complimentary and supportive of their recovery efforts. Most importantly, recovering addicts are a protected class under the Americans with Disabilities Act ("ADA").

Contrary to common belief, addiction and chemical dependency are not the same, although both may be present in the same individual. While dependency is a normal, physiological response to the repeated use of a substance, addiction is characterized by a loss of control, where one compulsively uses a substance despite life-threatening consequences. The best example is coffee. Millions are chemically dependent on it, but it does not necessarily result in life-threatening conditions.

WHAT IT TAKES TO SUSTAIN A SUCCESSFUL RECOVERY

Recovery from addiction is a long and challenging process. It is essential that patients develop a commitment to their own recovery and act as the "engine" driving the recovery process. In addition to overcoming cravings and withdrawal, it is imperative that the treatment address any co-occurring conditions or necessary behavioral modifications and changes in lifestyle. Such common conditions include depression, anger, anxiety, post-traumatic stress disorder (PTSD), grief, and peer pressure. Unless treated, these conditions are likely to cause unnecessary relapse.

However, relapse does not necessarily result in failure. While it is discouraged, relapse is an organic part of the recovery process. This is because committed patients often bounce back from relapse and carry on with an even stronger dedication to their recovery. Studies suggest that almost all patients with successful recoveries have experienced relapse.

WHAT IS THE HARM REDUCTION DISCIPLINE?

THE HARM REDUCTION DISCIPLINE is a science-based treatment approach that customizes treatment to the clinical conditions, strengths, support systems and cultural preferences of each individual, and allows for both short-term and long-term goals.

Unlike TOTAL ABSTINENCE, it allows individuals in treatment to progress at their own pace, and achieve recovery one step at a time. Decades of medical studies have found the Harm Reduction Discipline to be most effective for individuals facing various challenging lifestyle and co-occurring conditions, in addition to their addiction.

WHAT IS REPLACEMENT THERAPY?

REPLACEMENT THERAPY is an evidence-based, medically supervised procedure, in which a longer acting opioid such as methadone or buprenorphine (a.k.a. Suboxone), is prescribed as a substitute for an illegal opioid (e.g. heroin) or prescribed medication (e.g. Oxycodone).

The medication used in replacement therapy has a dual purpose – it not only blocks the effect of other opioids, but also relieves cravings and withdrawal symptoms. The use of medication in replacement therapy is consistent with the Harm Reduction Discipline. While the medication can cause physiological dependence, it helps prevent the life-threatening conditions caused by drug abuse.

Methadone and buprenorphine are among the safest medications with minimal side effects. There have been very few methadone overdoses recorded in the past 30 years, and in each instance, methadone was used (against medical advice) simultaneously with benzodiazepines (such as Xanax and Valium) and alcohol.

Long-term illicit opiate abuse has been shown to have a long lasting effect on the brain, even to the point of permanent damage. However, most patients who began treatment with methadone and buprenorphine within the first few years of drug abuse have achieved a full recovery and reversed such adverse effects.



WHY AEGIS?

Established in 1998, Aegis is the largest medication-assisted treatment (MAT) provider in California, and consistently achieves the highest rates of clinical success in its industry. Over the years, thousands of Aegis patients have successfully recovered from their addictions to pain killers and illicit drugs, after repeatedly failing in other programs and treatment modalities.

The Aegis Model and Your Successful Recovery

The Aegis Model is an innovative multi-disciplinary, evidence-based and outcome-driven treatment program that combines proven medication-assisted treatment with the following:

- Caseload Management, Coordination of Medical Care and Crisis Intervention
- Individual, Family and Group Counseling and Therapy
- Keys To Recovery (K2R) Support Group
- Social Work Services
- Educational Programs
- Discharge Planning and Aftercare Services

These services are provided under one roof in an effective, low-cost, out-patient setting. Services are provided by a dedicated multi-disciplinary team of professionals, comprised of physicians, physician extenders, psychologists, social workers, marriage and family therapists, nurses, counselors, caseload managers and medical assistants.

Credentials

Aegis meets the strict licensing and regulatory requirements of the Federal DEA, DHHS / SAMHSA, and state and local governments. It also holds the highest level of accreditation from the Commission on the Accreditation of Rehabilitation Facilities (CARF). In addition, Aegis is an approved provider of continuing education for the California Board of Behavioral Sciences.

Our Success Rates

- On average, over 80% of Aegis' patients in treatment for more than 90 days are illicit opiate free.
- 3 out of 4 Aegis patients report that their lives have positively improved after joining Aegis.
- Aegis has successfully treated over 100,000 patients over the last 15 years.



WHAT IS THE BEST TREATMENT PROGRAM FOR YOU?

21-Day Detox – An introductory program that gives patients, who have never been to a medication-assisted treatment, access to short-term treatment focusing on the tapering off of opioids.

Long-term Detox – A 180-day detox program that is most effective for patients with a short history of drug abuse, minimal co-occurring disorders, functioning support systems, and healthy and legal lifestyle.

Short-term Maintenance – A 12 to 18-month program that is specially designed for young adults who have a short history of addiction, and yet require extensive treatment for co-occurring disorders and assistance in reestablishing their lives.

Maintenance – A program for patients with a long history of drug abuse (heroin in particular), as well as extensive emotional and behavioral disorders. It allows customized treatment without pre-determined time constraints.

IMPORTANT NOTE: The selection of the treatment program is based on the clinical conditions, addiction history, support system, strength and cultural preferences of the patient. The ultimate goal for the majority of Aegis patients, and our young patients in particular, is to taper off of medication and lead a drug-free life.