



Virtual Pediatric Clinic For Chronic Care

Closing the chronic care gap for children with ADHD, anxiety & obesity

October 2026



Executive Summary

Clarity Pediatrics is a **virtual pediatric chronic care clinic**, built on AAP guidelines, Closing the chronic care gap for children with **ADHD, anxiety, & obesity**.



100% virtual

Care from home, on the family's schedule



**Commercial +
Medicaid**

Covered by insurance



<2 weeks

Fast access to care



ANSWER IN THE CHAT

Where are you facing the biggest gaps?

ADHD

Anxiety

Obesity

Agenda

01

Clarity's Why

Epidemiological background, filling the chronic care gap

02

Deep Dive on Obesity, ADHD & Anxiety Programs

Guidelines, program design, and clinical model for each condition

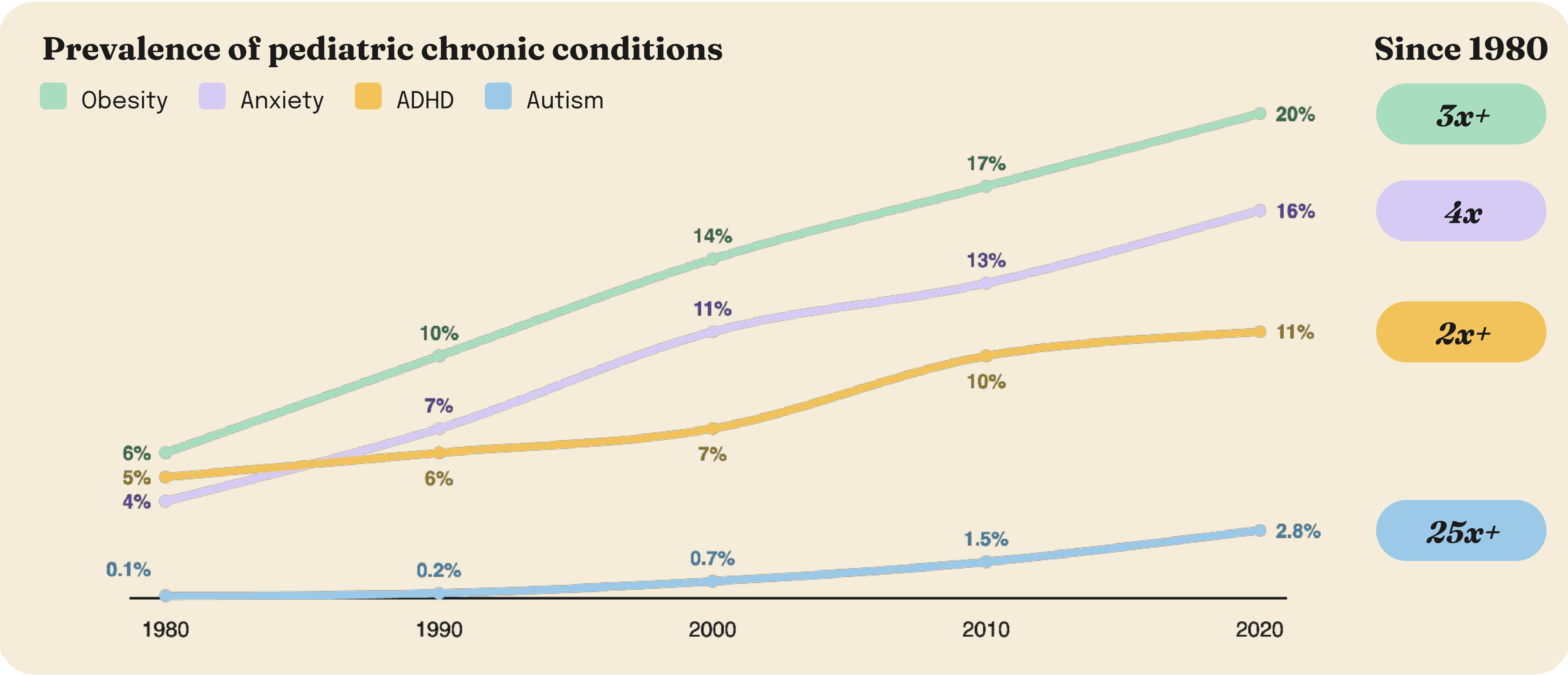
03

Referring to Clarity

How to refer and what families experience next

Clarity's Why

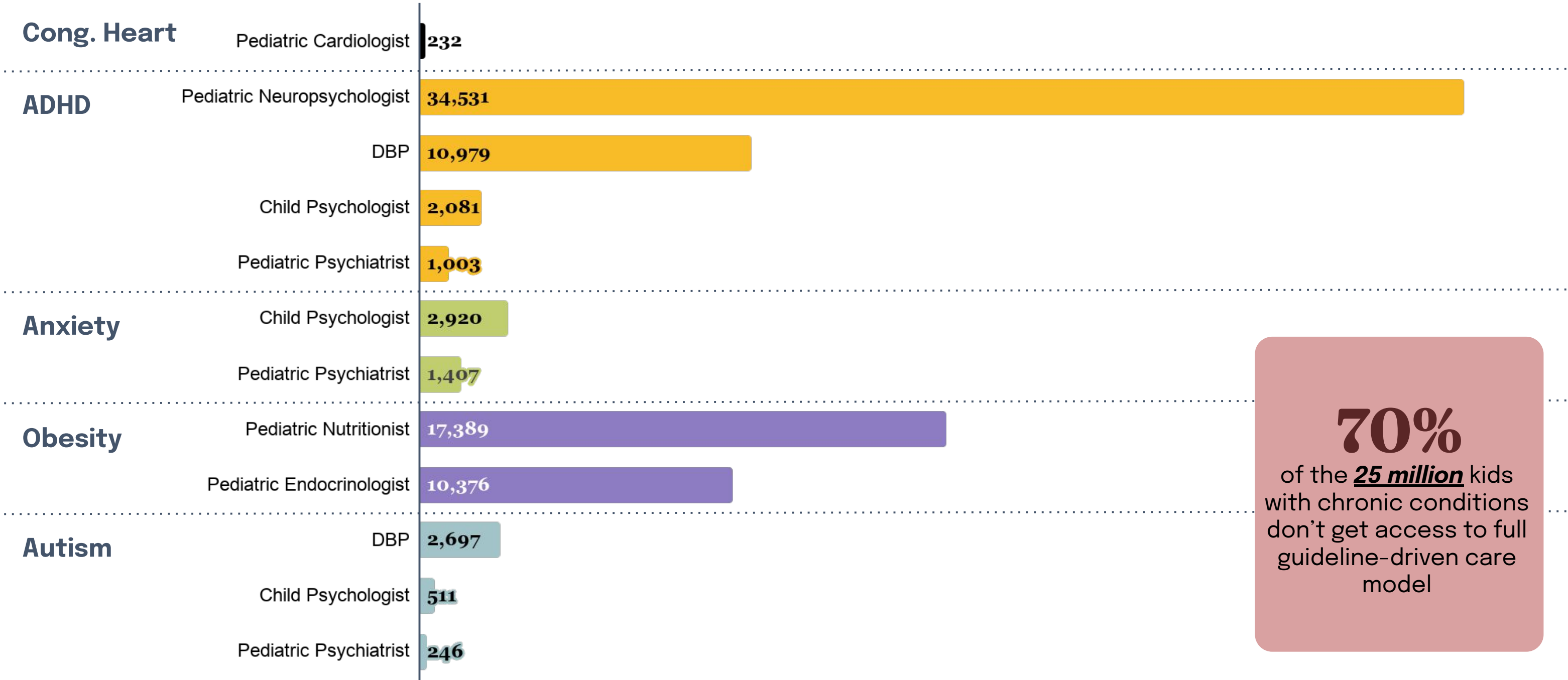
Pediatric obesity and mental health are the public health epidemic stories of our time



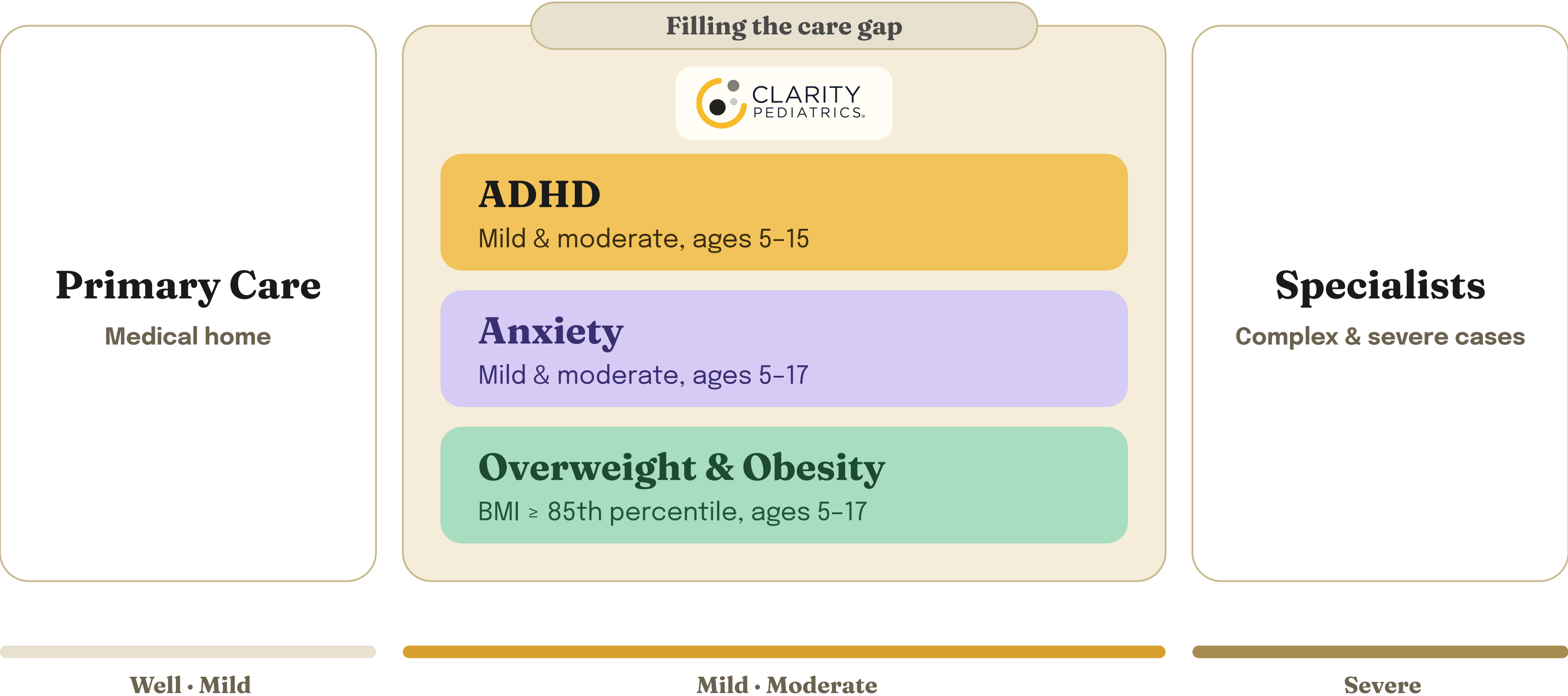
Clarity Pediatrics internal analysis; references available.

Specialist capacity has not kept pace with growth in diagnoses

Number of children with condition per specialist in the U.S.



Clarity serves patients who fall between primary care and specialty care, currently serving ADHD, anxiety & obesity



2026 Covered Pediatric Lives in California



Lowest cash pay rates in the country: **\$70** out of pocket per group session

Three strategies we use to close the chronic care gap

01 Telemedicine

MATCHING CLINICIANS TO NEED

Virtual care connects clinicians wherever they are with the children who need them, regardless of geography.

02 Evidence-based group care

MORE PATIENTS PER CLINICIAN

Where the evidence supports it, groups let each clinician reach more families. Technology makes groups frequent and flexible around busy parents.

03 Universal coverage

EVERY CHILD CAN ACCESS CARE

We aim to be in-network with every major plan, commercial and Medi-Cal, so cost is never the barrier.

Result: faster access to chronic care, for every child, close to home

How we collaborate with pediatricians at the medical home

HIPAA-compliant online referral

- 01 Pediatrician tells the patient you're referring and to look out for Clarity reaching out
- 02 Go to claritypediatrics.com
- 03 Select "Provider Referral" at the top right
- 04 Add your information once
- 05 Add the family's information
- 06 Clarity automatically texts & emails family to enroll in moments and calls within 24 hours
- 07 CHW or nurse care coordinator reaches out if automated outreach fails (increasing access to care up to 60%)

The image displays two overlapping screenshots of the Clarity Pediatrics website. The top screenshot shows the homepage with a navigation bar at the top right containing 'Patient Login' and 'Provider Referral' buttons; the 'Provider Referral' button is highlighted with an orange rounded rectangle. The bottom screenshot shows the 'Referring Provider Information' form, which includes a search bar for the 'Referring Provider' and a section for 'Parent/Caregiver Information' with fields for first name, last name, mobile phone, and email.

Referring Provider Information

If the referring provider is not listed or this is your first time referring to us, please click the "Add Provider" button on the bottom left.

Referring Provider

Begin typing to search...

Parent/Caregiver Information

Parent/Caregiver's first name
First name

Parent/Caregiver's last name
Last name

Parent/Caregiver's mobile phone
●●-●●-●●●●

Parent/Caregiver's email (optional, but preferred)
email@domain.com

Clarity is delivering care to thousands of families across California & Texas

**11,000**
patients treated

**62,000**
clinical sessions

**85**
Clarity providers

**10M**
pediatric covered lives

**23**
health plans contracted

**>2,400**
referring pediatricians

Obesity Program

What we hear from pediatricians

-  There isn't time in the well child check to thoughtfully discuss care options
-  IHBLT and endocrinology programs have 12 months+ waitlists, which has made finding immediate care options impossible
-  Parents are asking about GLP-1s, whether indicated or not
-  Prescribing & prior auths are nearly impossible when GLP-1s are indicated

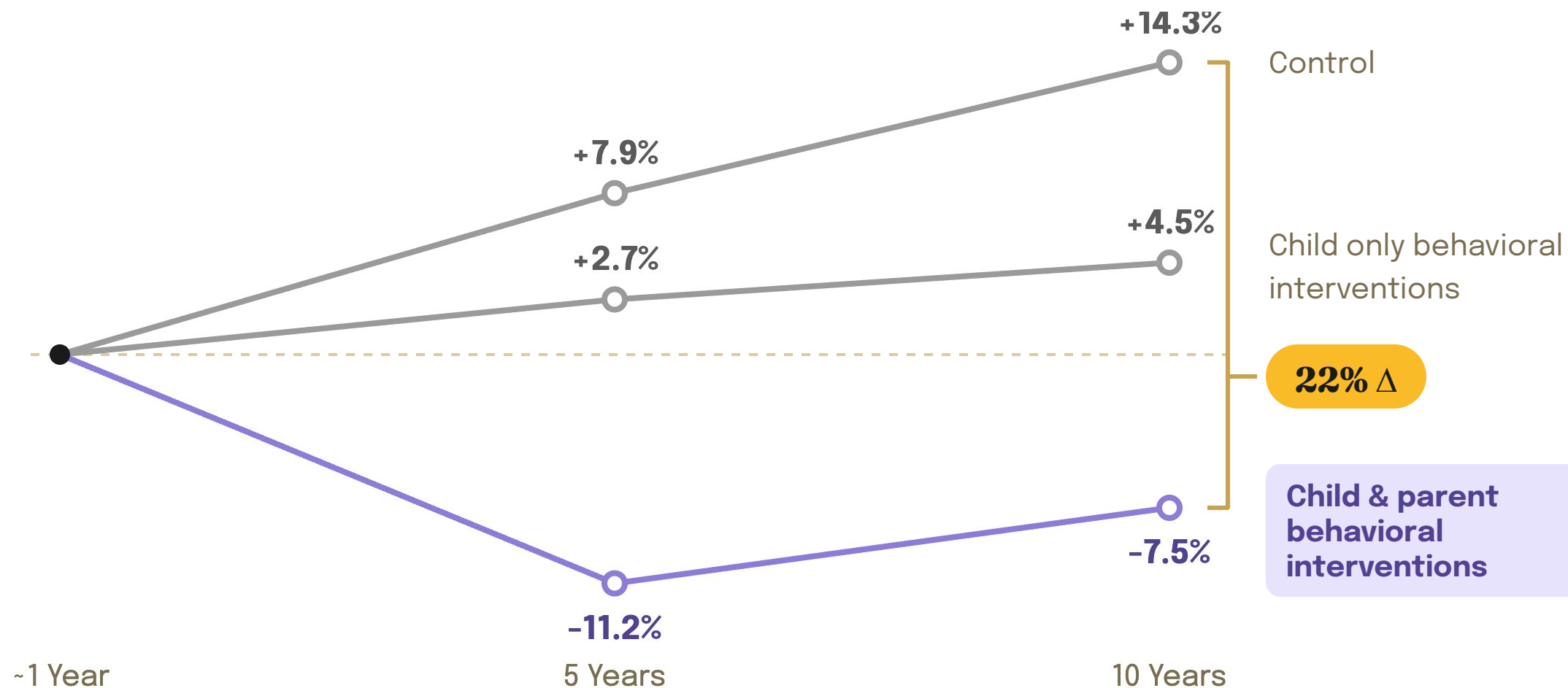
ANSWER IN THE CHAT

**What
challenges are
you
experiencing?**

Why refer now: Family-based interventions in childhood & adolescent obesity drastically improve outcomes 5 and 10 years later

Percent overweight change over time by treatment group

In patients with obesity

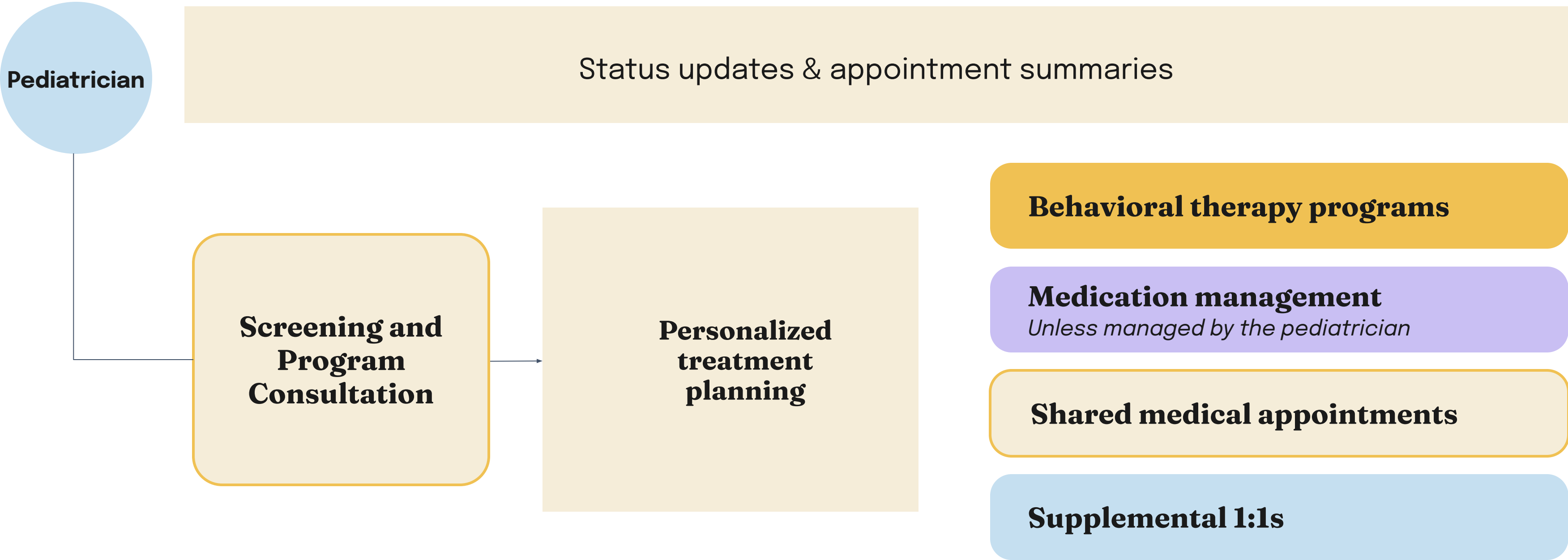


A **22%** difference between child & parent intervention and the control (primary care only) can significantly alter a child's long term trajectory:

- › Up to **6 years** increase in life expectancy
- › Up to **50% reduction** in risk of diabetes
- › **20-30%** reduction in risk of heart attack and stroke
- › **4 pounds** of pressure removed from knees for every pound prevented
- › Drastically improved mental health outcomes

 **80%** of adolescents with obesity remain obese in adulthood

Our evidence-based obesity approach extends pediatrician capabilities



Supporting resources: Spanish-language providers & groups, community health workers, care management

Clarity’s obesity program is designed to adhere to guidelines and research

Family-based Group Therapy



Virtual Parent Groups
Medical and Behavioral Health providers join small groups of parents (<10) to instill healthy habits and change the whole family’s lifestyle

Lab Orders & Management



Ongoing Baseline Labs
If indicated, we order labs to establish baseline vitals & determine eligibility for medications. We partner with Quest & Labcorp, but can also review recent results directly from the referring provider

Medication Management



Anti-Obesity Medications (e.g. GLP-1s) & Prior Auth Management
Our providers are experts on latest prescription protocols for pediatrics. We also manage all prior auth processes from start to finish

Interdisciplinary Team



Pediatrician, therapist, community health worker, registered dietician*
Pediatrician-led and supported by an integrated care team. Providers board certified in obesity medicine, lifestyle medicine, and pediatric endocrinology.
**Joining our team soon!*

More details on our core clinical model

Core Group-based Care (*parent-only*)

Introduction Education about important health markers 6 Pillars of Lifestyle Medicine	Values Identification Family values & motivations for making changes at this time Parents as the agents of change	Body Image “Body talk” in the home and the role of social media on body image	Emotional Eating Recognizing hunger cues HALT method: Are you Hungry, Angry, Lonely, or Tired?
Healthy Habits in the Community Creating healthy social networks Navigating situations where family is eating outside of the home	Nutrition "Traffic Light" eating (Red, Yellow, Green foods)	Movement “Traffic Light” physical activity	Sleep & Screen time The health benefits of restorative sleep The role of electronics/screens

1-on-1 Care

Labs & Monitoring ALT, A1C, fasting lipid panel, fasting glucose, anemia screening, vitamin D, calcium
Lifestyle Intervention Motivational interviewing on nutrition, collaborating with parents to create SMART goals, including for activity, nutrition, and sleep
Pharmacotherapy Anti-obesity medications, including GLP-1 receptor agonists (liraglutide/semaglutide) for adolescents

Our obesity program is driving strong family engagement and reaching kids early, when intervention matters most

LAUNCHED APR 2026

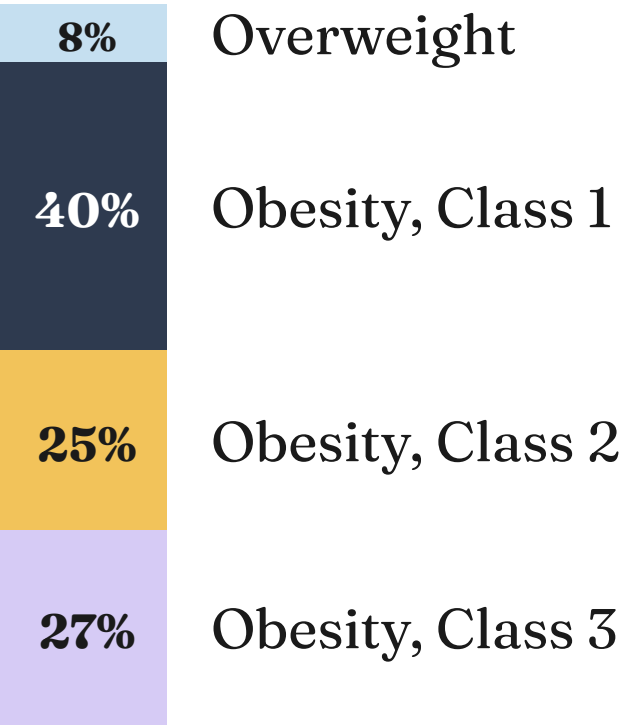
Obesity

69%

Average group attendance

Across sessions

CLINICAL SEVERITY AT REFERRAL



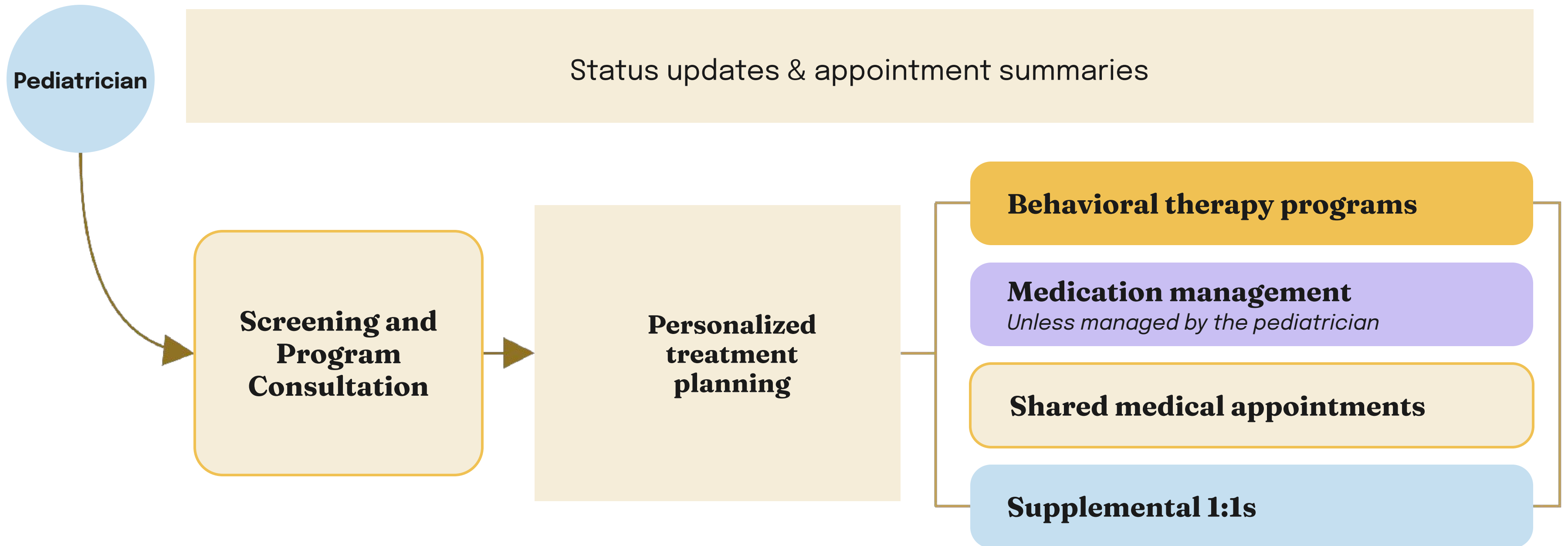
About half of our patients are relatively early in disease progression – the best window to intervene.

Referrers tell us early-stage patients have nowhere else to go and often fall through the cracks.

BMIz outcomes publish in the next review cycle

ADHD Program

Our evidence-based ADHD approach extends pediatrician capabilities



Supporting resources: Spanish-language providers & groups, community health workers, care management

More details on our core clinical model: ages 5–11

Behavioral Parent Training (Group)

Special Time

Strengthen the parent-child relationship through intentional play.

Praise

Use specific, labeled praise to reinforce positive behaviors.

Effective Commands

Give clear, actionable instructions children can follow.

Routines & Rewards

Set predictable routines and reward systems for daily expectations.

Selective Attention

Use attention strategically to grow desired behaviors.

Effective Consequences

Apply consistent, calm consequences for problem behaviors.

Validating

Acknowledge your child's feelings while holding limits.

Co-Regulating

Help your child manage big emotions through co-regulation.

1-on-1 Care

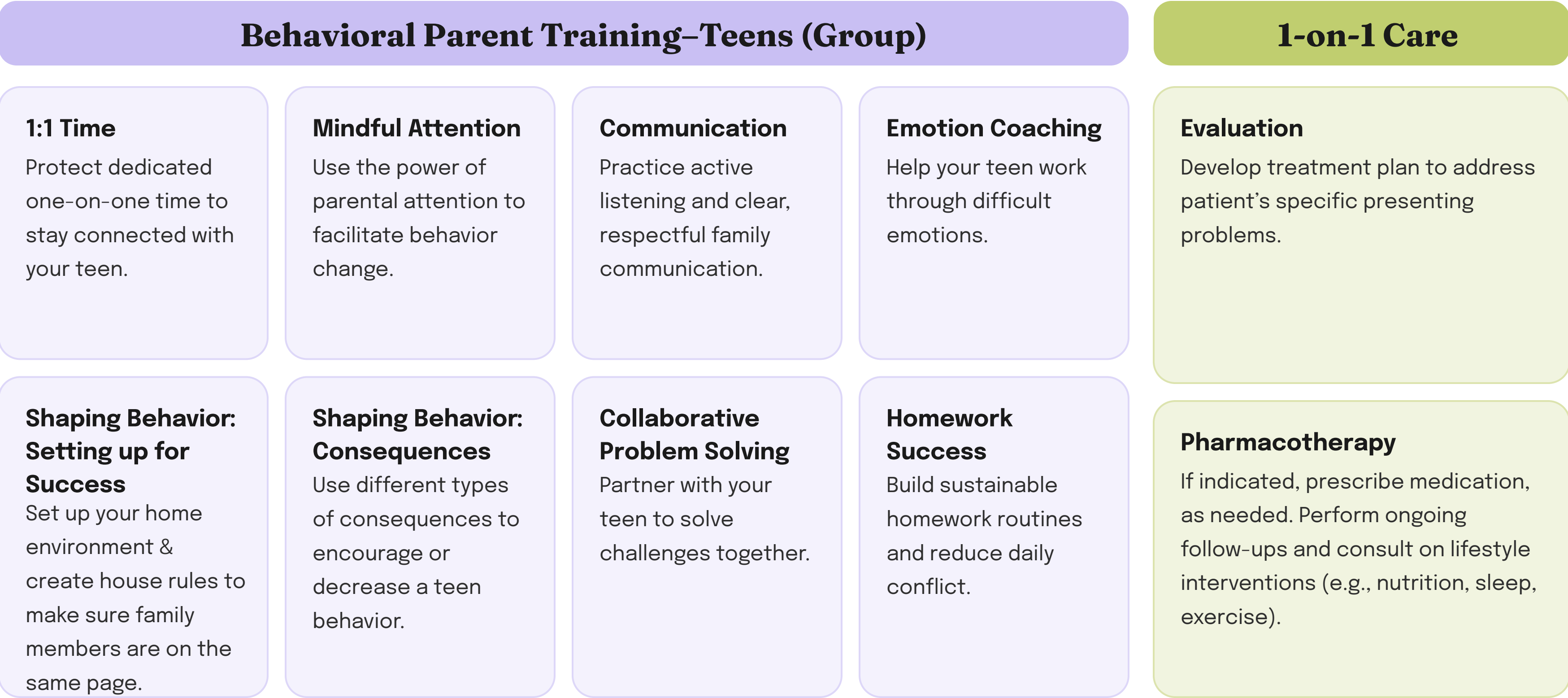
Evaluation

Develop treatment plan to address patient's specific presenting problems.

Pharmacotherapy

If indicated, prescribe medication, as needed. Perform ongoing follow-ups and consult on lifestyle interventions (e.g., nutrition, sleep, exercise).

More details on our core clinical model: ages 12–15



Evidence-Based Group Programs for ADHD

<i>Parents only</i> Behavioral Parent Training Kids and teens with ADHD, or co-occurring ASD-1 and ADHD ✓ Strengthening parent-child relationship ✓ Building routines ✓ Structuring positive and negative reinforcement	<i>Parents & child</i> Homework Organization Best for children 8-12 with daily homework ✓ Managing homework ✓ Tracking assignments ✓ Organizing school materials	<i>Parents only</i> Managing Big Emotions Best for ages 5-11 with emotional dysregulation ✓ Building emotional vocabulary ✓ Building coping strategies ✓ Improving emotional resilience	<i>Parents only</i> Medical Groups Best for ages 5-17 on, or considering, medication Learning about ADHD medications Medications, treatment guidelines, and long-term management Living well with ADHD Lifestyle medicine (nutrition, exercise, sleep) & impact on ADHD symptoms
<i>Behavioral Health clinician-led, 8 sessions each</i>			<i>Physician-led, 4 sessions</i>

Medical Group: Learning About ADHD Medications

Who is a good fit for the group?

- Medication-resistant or hesitant families
- Families seeking insight on medication’s role as part of a comprehensive ADHD treatment plan
- Families who have questions about pathophysiology of medication
- Families who want to learn about the different ADHD medications available

Structure: 4-session group focused on ADHD medications, guidelines, and management

Sessions & Content

1 Understanding ADHD & Medication Basics

Understanding ADHD as a neurodevelopmental “brain based” difference

2 Research & ADHD Treatment Guidelines

How ADHD medications work
Considering medications as part of a comprehensive treatment plan

3 Deep Dive into Stimulant Medication

What can (and can’t) medications do?
Learning about possible side effects

4 Next Steps & Long-Term Management

How to work effectively with your medical provider
Monitoring treatment progress

Medical Group: Living Well with ADHD

Who is a good fit for the group?

- Families who have questions about how to optimize their child’s nutrition, physical activity, and sleep patterns to improve ADHD management
- Patients must have an established diagnosis of ADHD

Structure: 4-session group focused on lifestyle medicine (nutrition, exercise, sleep) & impact on ADHD symptoms

Sessions & Content

1 Proteins, Fruits & Vegetables for ADHD Success

How different types of foods impact brain function (e.g., focus), mood, etc.

2 Meal Planning & Reducing Processed Foods

Parents control the food environment by choosing what foods enter the home & meal prepping

3 Restorative Sleep = ADHD Success

Deep sleep improves focus, learning, and emotion regulation

4 Movement as Medicine

Vigorous physical activity supports better focus and impulse control

Our ADHD program delivers measurable symptom improvement on validated Vanderbilt scales — documented in our 2026 Clinical Outcomes Report

ADHD

VALIDATED VANDERBILT MEASURES

42%

Reduction in oppositional defiance symptoms at home

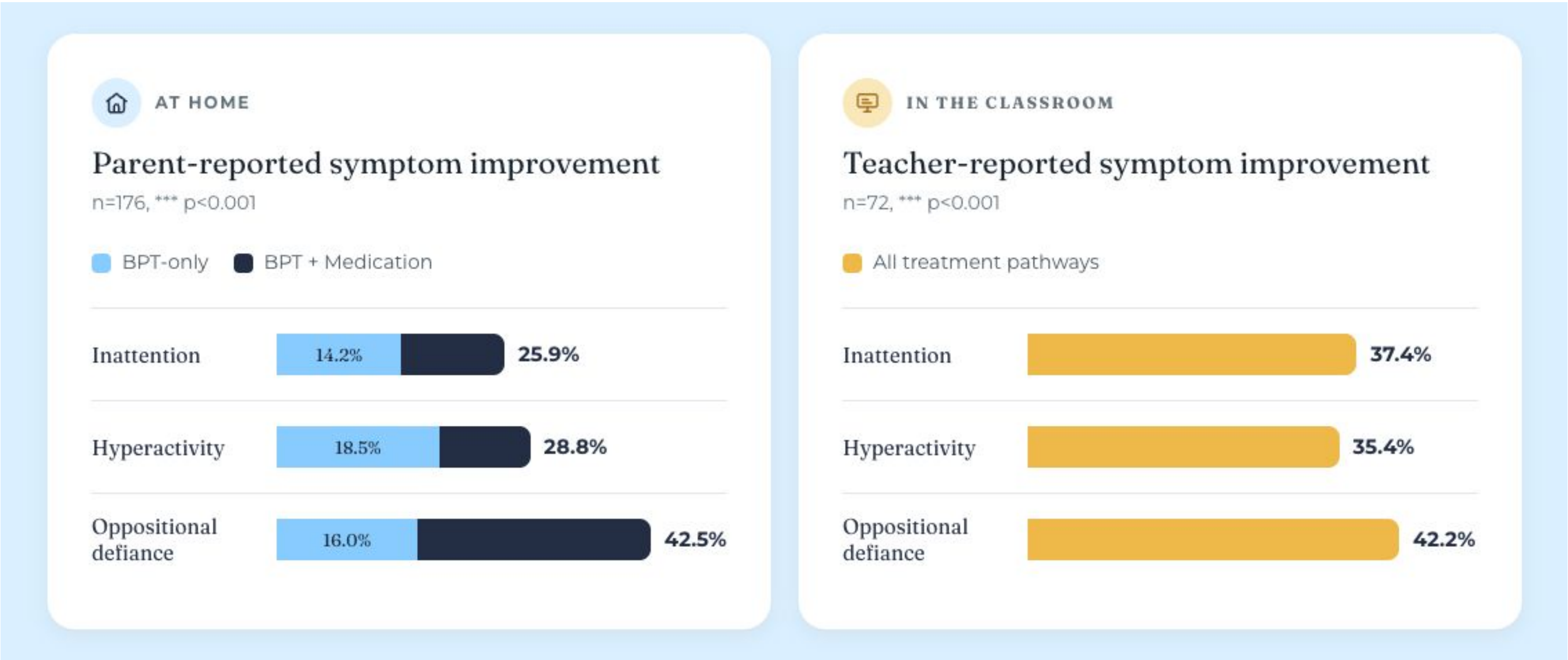
Parent-reported, after Behavioral Parent Training

79%

HEDIS follow-up care

vs. 43% national benchmark

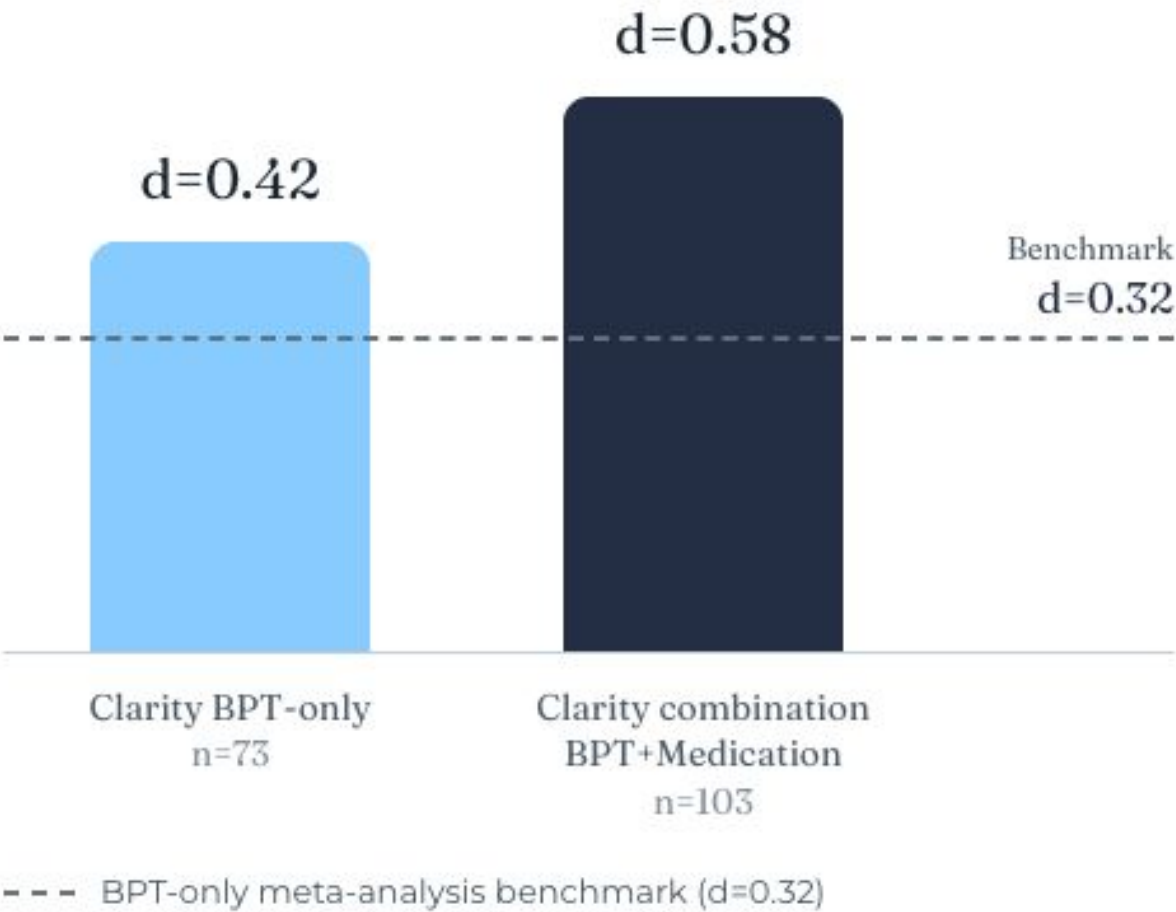
Our ADHD program delivers measurable symptom improvement on validated Vanderbilt scales — documented in our 2026 Clinical Outcomes Report



Our ADHD Outcomes exceed benchmarks

Parent-reported ADHD outcomes by treatment pathway

Standardized effect size (d); higher values indicate more symptom improvement



1.4x

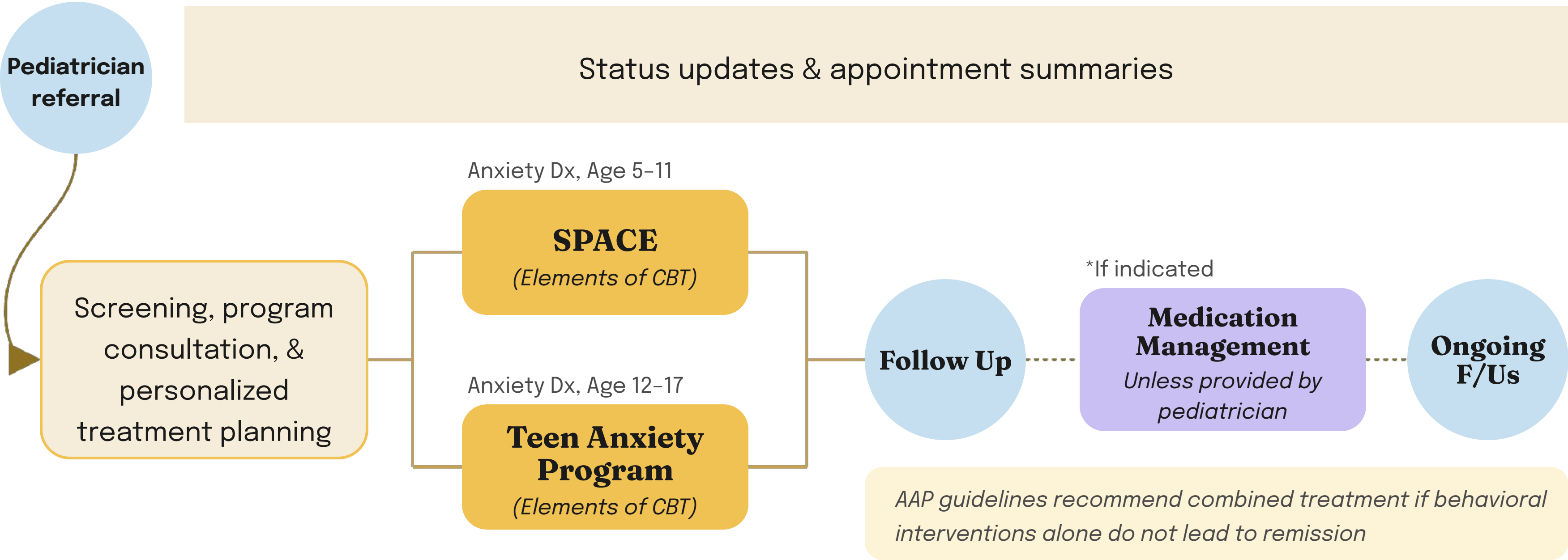
effect when BPT is combined with medication

INDEPENDENT STATISTICAL VALIDATION

Clarity's ADHD outcomes analysis was independently reviewed and validated by a leading biostatistician whose research spans advanced quantitative methods and peer-reviewed studies of ADHD treatment and outcomes.

Anxiety Program

We built our anxiety program to follow the research



Supported by: community health workers, care management

More details on our core clinical model: ages 5–11

SPACE: Group-based Care (Parents)

1-on-1 Care

Orientation to SPACE

Identify how anxiety presents in your child.

Supportive Statements and Charting Rescues

How to provide supportive statements to your child.

Choosing a Target Rescue

Identify an appropriate target rescue to work on. Create a support system.

Announcement & Plan

Make a plan to reduce rescues.

Evaluation

Develop treatment plan to address patient’s specific presenting problems.

Making the Announcement

Prepare for making the announcement.

Supporting Your Child Through Change

Use reinforcers to facilitate change.

Reducing Rescues

Identify your next target rescue to work on.

Maintaining Progress

Maintain gains and learn to apply tools to future anxious behaviors.

Pharmacotherapy

If indicated after behavioral treatment, prescribe medication (e.g., SSRIs), as needed. Perform ongoing follow-ups and consult on lifestyle interventions (e.g., nutrition, sleep, exercise).

Detail on our core clinical model: ages 12–17

TAP: Group-based Care (Parents & Teens, concurrently)

Understanding Anxiety

Learn to identify anxiety and understand when it has become a problem.

False Alarms

Differentiate between real problems (that need to be solved) and false alarms.

Planning Brave Practice

Create a fear ladder and engage in brave practice.

Safety Behaviors

Identify and reduce safety behaviors that maintain anxiety.

Brave Practice

Gradually face feared situations.

Overthinking

Learn to tolerate uncertainty.

Thinking Traps

Coping thoughts for common thinking traps.

Planning for the Future

Manage anxiety even after the group ends.

1-on-1 Care

Evaluation

Develop treatment plan to address patient’s specific presenting problems.

Pharmacotherapy

If indicated after behavioral treatment, prescribe medication (e.g., SSRIs), as needed. Perform ongoing follow-ups and consult on lifestyle interventions (e.g., nutrition, sleep, exercise).

Families in our anxiety program report meaningful improvement in managing symptoms — documented in our 2026 Clinical Outcomes Report

Anxiety

LAUNCHED SEPT 2025

90%

Of families report improved management of anxiety symptoms

Family-reported, following treatment

95%

Of families say Clarity had a large impact on their lives

Validated symptom measures publish in the next review cycle

Engaging with Clarity

Three ways to engage with Clarity

1

Refer a patient

Send referrals directly through our site – it takes about a minute.

claritypediatrics.com

2

Set up a clinical presentation with your practice or health system

Email us and we'll get in touch to schedule a session.

providers@claritypediatrics.com

3

Download & share our Clinical Outcomes Report

See the full 2026 results across ADHD, anxiety & obesity.

claritypediatrics.com/clinical-outcomes-2026

Clarity is rooted in the community, and accessible to every family

SCHOOLS

Engagement with schools

- Seminars with parents on IEP & 504 accommodations
- Webinars with teachers & learning specialists on managing ADHD
- Parent ambassador program, understanding school needs from the parent standpoint
- Vanderbilt teacher ratings collected directly from teachers

FAMILIES

Language & family support

- Spanish-language providers & Spanish-language groups
- Community health workers who follow up with every family, turning referrals into booked appointments

ACCESS

Broad in-network coverage

- All major commercial plans
- Medicaid, incl. Superior & WellPoint

Thank You!

alarrazabal@claritypediatrics.com

One clinical model, tailored for different chronic conditions

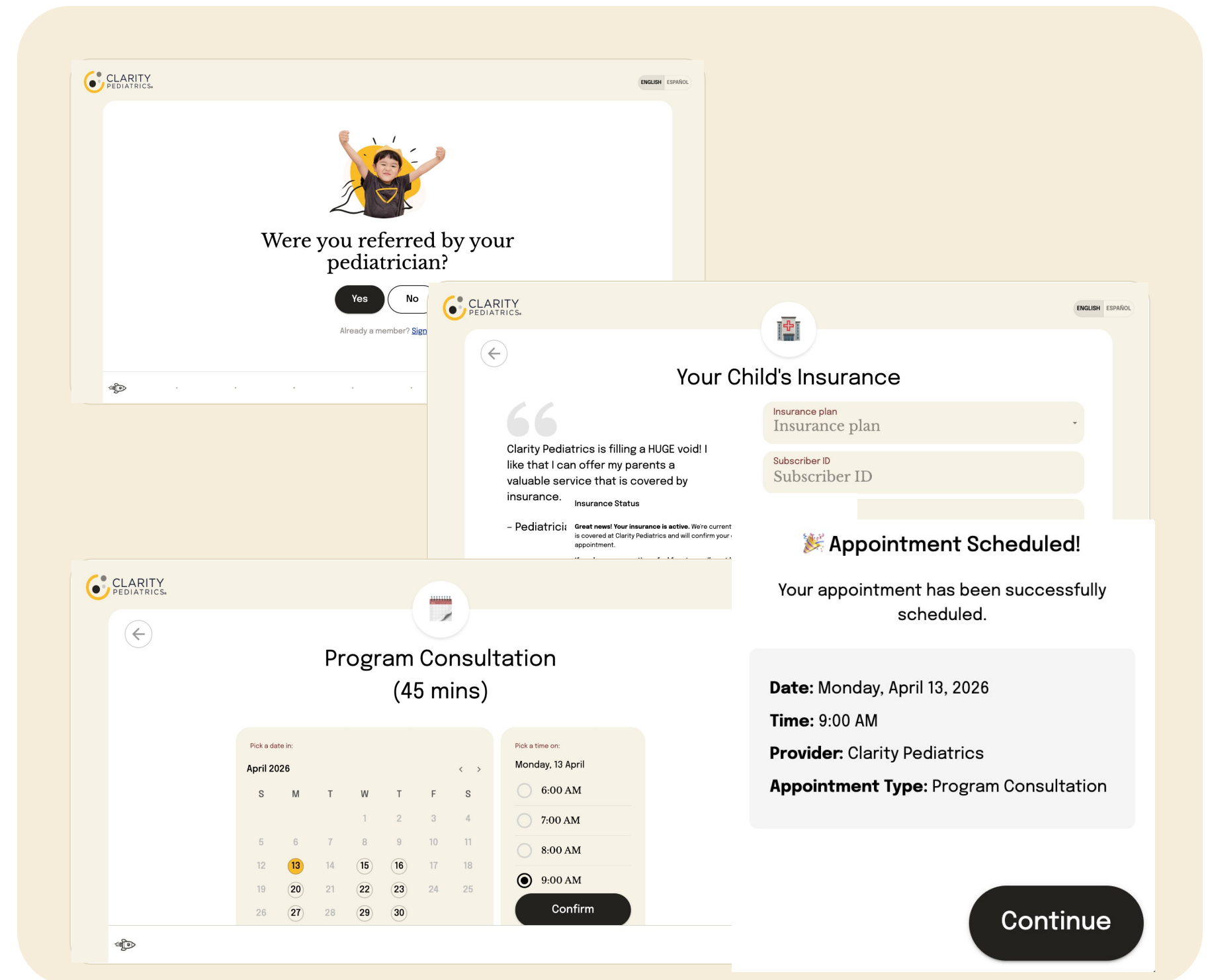
	1 Screening & Diagnosis	2 Group-Based Behavioral Care	3 Medical Management
ADHD Ages 5-17	Diagnosed & suspected ADHD Vanderbilt parent + teacher rating scales Structured clinical interview	Behavioral Parent Training: ages 5-11 & 12-17 Homework Organization: ages 8-12 Managing Big Emotions: ages 5-11 Parent-focused, clinician-led, 8 weeks IEP & 504 School Accommodation Seminar One-time group seminar	ADHD medication management* , unless managed by the pediatrician Shared medical appointments: - Learning About ADHD Medication - Living Well with ADHD Physician-led, 4 sessions each
ASD-1 + ADHD Ages 5-11	Existing ASD-1 diagnosis (Level 1 only) No ASD evaluations at Clarity Program consultation confirms fit	Research Unit on Behavioral Intervention (RUBI)Parent Training: ages 5-11 Parents only, 8 weeks	ADHD medication consultation & management* ADHD shared medical appointments
Anxiety Ages 5-17	Diagnosed & suspected anxiety Validated tools: GAD-7, PHQ-9, PROMIS, SMFQ Clinical interview + virtual-care safety screen	Supportive Parenting for Anxious Childhood Emotions (SPACE): ages 5-11 Parents-only Teen Anxiety Program: parents + teens 12-17 Individual therapy (1:1)† CBT elements, 8 weeks, AACAP first-line	Medication management, SSRIs second-line* Ongoing medical follow-ups
Overweight & Obesity Ages 5-17	BMI ≥ 85th percentile or rapid rise Baseline labs if needed	Positive Parenting for Healthy Weight: 8 families, 8 sessions, ages 5-17 Nutritionist group: 4 sessions Monthly maintenance check-ins: 12 months FBT-based, per AAP guidelines	1-on-1 medical visits Anti-obesity meds incl. GLP-1s if indicated**

* Medication only when clinically indicated · ** Full prior-authorization support · † Pilot

Referring to Clarity

Patient registration information

- 01 Pediatrician information confirmation
Most of their information comes from your referral, saving them time and effort!
- 02 Confirmed contact information
- 03 Release of information, terms & conditions, etc.
- 04 Insurance information and payment information
(for non-Medicaid patients)
- 05 Clinical information, diagnoses, goals in care, safety check
- 06 Scheduling an appointment

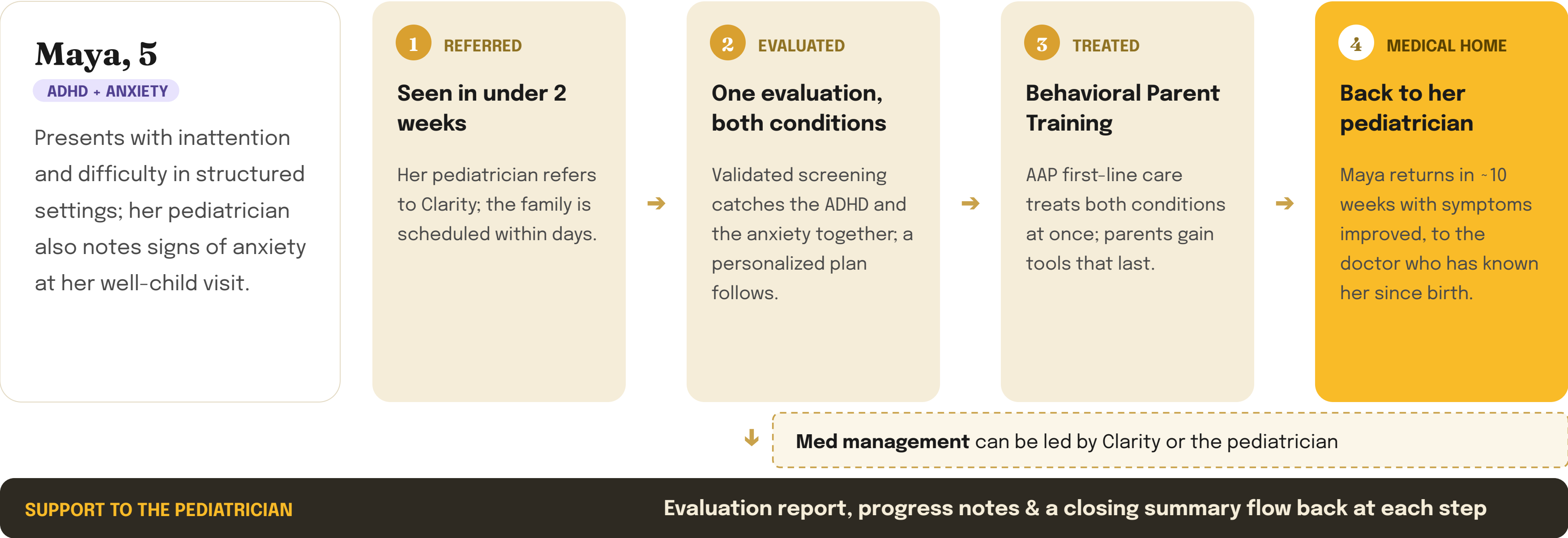


The collage displays four sequential screens from the Clarity Pediatrics app:

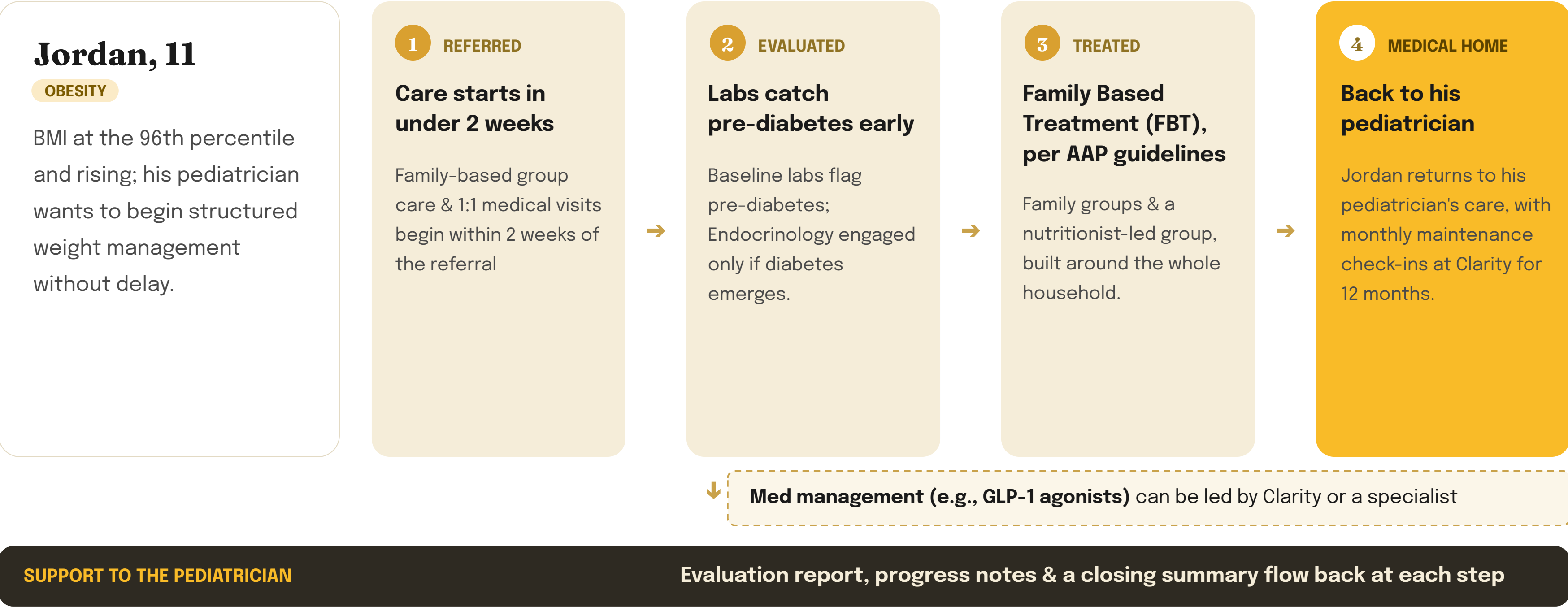
- Screen 1: Referral Confirmation** - Features a child icon and asks, "Were you referred by your pediatrician?" with "Yes" and "No" buttons. A link for "Already a member? Sign in" is visible.
- Screen 2: Your Child's Insurance** - Includes a quote from a parent: "Clarity Pediatrics is filling a HUGE void! I like that I can offer my parents a valuable service that is covered by insurance." It has input fields for "Insurance plan" and "Subscriber ID".
- Screen 3: Appointment Scheduled!** - Displays a confirmation message: "Your appointment has been successfully scheduled." with details:
 - Date:** Monday, April 13, 2026
 - Time:** 9:00 AM
 - Provider:** Clarity Pediatrics
 - Appointment Type:** Program Consultation
- Screen 4: Program Consultation (45 mins)** - Shows a calendar for April 2026 with the 13th highlighted. To the right, a time selection menu for Monday, 13 April, has "9:00 AM" selected. A "Confirm" button is at the bottom.

A large "Continue" button is positioned at the bottom right of the collage.

Maya's journey with Clarity



Jordan's journey with Clarity



Supporting Pediatricians

How we support our network of 2,200+ referring pediatricians



Simple referrals

- 1-minute online form, with options to build customized Direct Secure Messaging and eFax referrals
- Families are guided into care over phone, email, and text



Closed loop communications

- Evaluation report after intake, progress notes during treatment, & a closing summary when the family returns
- Note to pediatricians when parents don't get into care



Flexible care model

- Keep medication management or hand it to us
- Screening & escalation criteria aligned with your team



Clinical presentations

- Regular sessions for your practices, keeping teams up to date on research & Clarity's progress

Clarity serves patients who fall between primary care and specialty care, currently serving ADHD, anxiety & obesity

