CLARITY PEDIATRICS®

2026

Pediatric Clinical Outcomes Report

Clarity Pediatrics is a virtual pediatric chronic care clinic delivering integrated behavioral and medical care — physicians and therapists working as one team — for ADHD, anxiety, and obesity.

PREPARED BY

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Executive Summary

A note from Dr. Larrazabal

At least 25M children in the US live with a common chronic condition, yet too few have timely access to evidence-based care. Clarity Pediatrics is solving this problem with a virtual, group-based model that makes trusted specialty care accessible to families. For the first time, we are publishing our clinical outcomes and sharing our vision for a more personalized standard of care.

The central challenge in pediatric chronic care is a delivery system capable of translating abundant evidence into affordable, coordinated, longitudinal care at scale. Guidelines define evidence-based treatment, but not how to deliver it to millions of children. The result is long waits, fragmented care, and lack of coverage.

Clarity Pediatrics was founded nearly five years ago to close this gap, starting with ADHD and expanding into anxiety in late 2025, and obesity just a few months ago in 2026. Our model is delivering strong clinical outcomes:

- **ADHD:** Behavioral Parent Training (BPT) outcomes *exceed a rigorous published benchmark,* while adding medication management amplifies the overall treatment effect by a factor of 1.4x. This combination care was associated with a 42.5% reduction in oppositional symptoms, and teachers confirmed significant classroom improvement. Importantly, there was no difference in outcomes between Medicaid and commercially insured patients, a meaningful demonstration of equity in our clinical results.
- **Anxiety:** 90% of families report improved management of anxiety symptoms following treatment.
- **Obesity:** Early participants attended 70% of the group family-based therapy sessions on average, strong early engagement for an important intervention for a stigmatized condition.
- **Referring providers:** 70% report that Clarity has reduced their care burden.

This first outcomes review is both a milestone and a starting point. As our understanding of our patient population grows, this data will allow us to link treatment pathways with outcomes reported by children, families, teachers, and clinicians.

These data will help us move beyond what works on average to understand what works best, for which children, and under what circumstances. Our aim is to set a new standard: an evidence-based delivery system that enables precise care at scale.



ALESANDRO LARRAZABAL, MD, FAAP
CO-FOUNDER & CHIEF MEDICAL OFFICER

AT A GLANCE

10,865

Clarity patients served in the last 2 years (Aug '24-Aug '26)

42%

Reduction in ODD ADHD symptoms with combination care

80%

Group participant attendance in Behavioral Parent Training (BPT) for ADHD

90%

Of families reported their management of anxiety symptoms improved

Our Why

Clarity's solution to the "Chronic Care Gap"

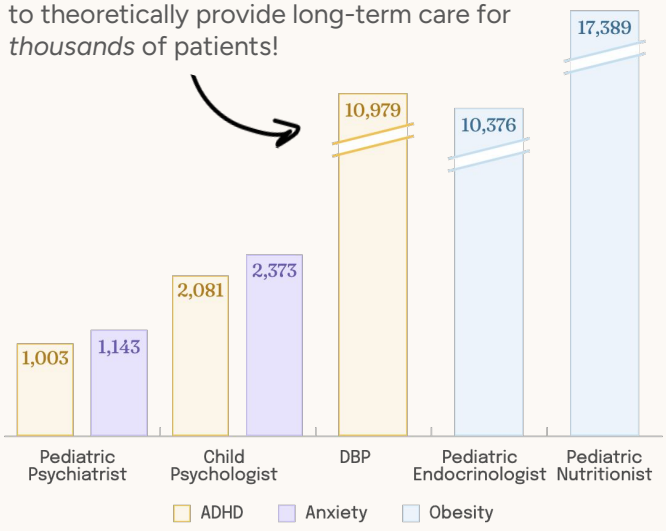
THE CHRONIC CARE GAP

Prevalence of pediatric ADHD, anxiety, and obesity has grown quickly since 1980 — ADHD diagnoses are up 2x, anxiety 4x, and obesity 3x — while the pipeline of specialists trained to treat these patients has not kept pace. The chart below shows how limited specialty capacity leaves pediatricians burdened with a growing share of chronic care, and families at-risk of falling through the cracks.

Pediatric patients with chronic conditions therefore face a systemic access crisis: they are waiting up to 12 months to see a specialist; and integrated behavioral- plus-medical care is rare, shifting the burden of coordination onto families and pediatricians.

Ratio of kids with ADHD, anxiety or obesity to each specialist type in the US

Every one of these specialists is supposed to theoretically provide long-term care for *thousands* of patients!



Sources: CDC, WHO, NIH, AACAP, APA, Commission on Dietetic Registration, Pediatric Endocrine Society

CLARITY'S SOLUTION

Clarity delivers evidence-based pediatric chronic care through a virtual, group-based model designed to scale access for families. Care is delivered by an integrated team of physicians and therapists, applying a personalized but consistent clinical standard to every patient.

Clarity's Care Model

COMPREHENSIVE CLINICAL TEAM
Physician-led care to AAP & AACAP guidelines. Physicians and therapists work together to diagnose and provide multimodal treatment to patients.

COVERED BY COMMERCIAL & MEDICAID
Commitment to serving all patients. Average commercial copay $25, Medicaid $0.

CONVENIENT GROUP CARE
Our scalable, virtual group model means patients are seen within weeks, with care accessible from anywhere.

LONG-TERM CARE COLLABORATION
Regular care plan updates to the referring pediatrician at key clinical milestones.

2 weeks
Clarity's average time to first appointment vs. industry average of 3 -12 months for pediatric behavioral care

10 million
Pediatric patients covered by our insurance contracts, including Medicaid and commercial plans in CA & TX

14 minutes

That's the average appointment time a pediatrician has with a child, but most pediatric chronic conditions require complex, long-term interventions.[1]

Today, *more* kids are being diagnosed with chronic conditions and specialists have year-long waitlists.

We are a *partner* and an *extension* to every pediatrician's practice. We work together to set kids on a better *health trajectory,* for life.

Who We Serve

We provided care for nearly 11,000 families in the last 2 years

Clarity has expanded from our founding ADHD program to anxiety care in September 2025 and obesity in April 2026. Across these programs, families have completed nearly 62,000 care sessions, reflecting a longitudinal model designed to support children over time.

As our programs have grown, we are increasingly caring for children with overlapping needs, and nearly one-third are now being treated for more than one condition.

Clarity currently serves families in California and Texas, with expansion to additional states planned for 2027.

10,865

Total patients seen
Aug 2024 - Aug 2026

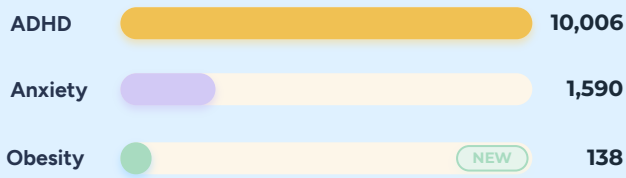
61,943

Care sessions across all programs in last 2 years

1,937

Patients seen with multiple co-occurring diagnoses

Patient Demographics & Characteristics



Bars scaled relative to the ADHD program (largest). Numbers as of August 2026, Anxiety program launched September 2025, Obesity program launched April 2026. Numbers include patients who had at least one visit; due to co-occurring conditions, some patients are counted in more than one program.

CHARACTERISTIC	DETAIL
Age range	5–17 years
Gender	61% male · 38% female · 1% other
States	California, Texas
Payer mix	73% Commercial · 27% Medicaid

CO-OCCURRING CONDITIONS

17%

As we expand into more conditions, we're getting an increasing number of referrals with a co-occurring condition. From Aug '24-Aug '26, 17% of patients had a co-occurring condition; narrowing to the most recent month, Aug '26, that figure rises to **31% of patients**.

Our Treatments

Providing care that our kids deserve

Clarity clinicians create a personalized and comprehensive treatment plan for each family. Clarity provides a wide-range of evidence-based treatments across ADHD, anxiety and obesity.

ADHD

- Behavioral Parent Training (BPT)
- RUBI Parent Training for autism
- Advanced Behavioral Skills
- Shared Medical Appointments
- Medical Management

Anxiety

- SPACE (Parent Training)
- Teen Anxiety Program (TAP)
- Medical Management

Obesity

- Positive Parenting for Healthy Weight (PPHW)
- Medical Management

Behavioral Parent Training (BPT) & RUBI[2-5]

Equips caregivers as coaches to encourage positive, focused behaviors and respond to challenging behaviors. Groups are formed of parents of children ages 5-11 and 12-15. Four decades of research show BPT outperforms all other therapies for ADHD. A validated adaptation of BPT, RUBI Parent Training, is available for children ages 5-11 with co-occurring mild autism level 1.

Advanced Behavioral Skills

For families who have completed BPT and want to build on specific, everyday challenges: managing “big emotions” for ages 5-11 and homework skills for 8-12.

Shared Medical Appointments

Physician-led group visits for ages 5-17 run as two separate tracks: ADHD medication education, and lifestyle medicine covering nutrition, exercise, and sleep.

Supportive Parenting for Anxious Childhood Emotions (SPACE)[6,7]

Empowers parents of children 5-11 to replace anxiety-maintaining "rescues" with confidence-building strategies. A clinically proven gold-standard treatment matching the efficacy of traditional CBT.

Teen Anxiety Program (TAP)[8,9]

Combines adolescent-focused CBT strategies with the active ingredient of exposure therapy, known as "brave practice." Parents of teens 12-17 participate in a parallel program to scaffold their teenager's progress through difficult moments.

Positive Parenting for Healthy Weight [10,11,12]

Helps reshape the home environment around nutrition, activity, and sleep, so change happens for the whole family, not just the child. Considered the gold standard for pediatric obesity, family-based therapy (FBT) is delivered in parent-led groups for children ages 5-17.

Medical Management

Board-certified pediatricians, nurse practitioners, and physician assistants conduct comprehensive medical assessments and oversee medication management, lab interpretation, and longitudinal monitoring — in close collaboration with behavioral health specialists. This includes prescribing for SSRIs for anxiety, stimulant and non-stimulant medications for ADHD, and GLP-1 medications for obesity where appropriate.

Outcomes

Our ADHD Program

Treated more than 10,000 patients since August 2024

As Clarity's founding and largest clinical program, our ADHD service has provided care to more than 10,000 children and adolescents since August 2024, including evaluation visits. Treatment may include Behavioral Parent Training (BPT), medication management, or both, delivered through coordinated medical and behavioral health care.

Clarity's 80% group attendance rate was higher than 72% benchmarks from review papers.[13,14] In family surveys, 92% reported improvements in behavior; among children receiving medication, 79% received follow-up care within 30 days, nearly double the 43% national HEDIS benchmark.

ADHD PATIENTS

10,006 patients | Mean age = 10.5

Gender (%)



- Female · 36%
- Male · 63%
- Other · 1%

Treatment Type (%)



- BPT-only · 38%
- Combination · 27%
- Medication-only · 35%

80% **Average group participant attendance across sessions**

SURVEY RESULTS (n=532)

92%

Of families reported improvements in behavior

91%

Of families said Clarity had a large impact on their lives

MEDICATION MANAGEMENT

79%

HEDIS Score vs 43% benchmark
Follow-up care for children prescribed ADHD medication

Source: NCQA, 2023

Outcomes

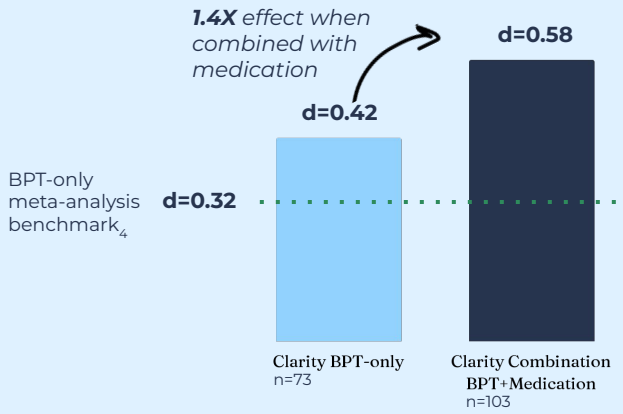
Our ADHD Outcomes Exceed Benchmark

High quality behavioral care with added medication benefit

Clarity's ADHD Behavioral Parent Training (BPT)-only outcomes exceed published benchmarks for behavioral ADHD treatment.[4] Our integrated model delivers the combination of behavioral and medical care recommended by the AAP, coordinated within one care team. In our outcomes, adding medication management increased the overall treatment effect by 1.4x.

Combination care produced a 42% improvement in oppositional symptoms, and teachers validated meaningful improvement in the classroom. An independent multivariate analysis found no significant difference in ADHD outcomes between Medicaid and commercially insured patients, demonstrating equity in our clinical care model.

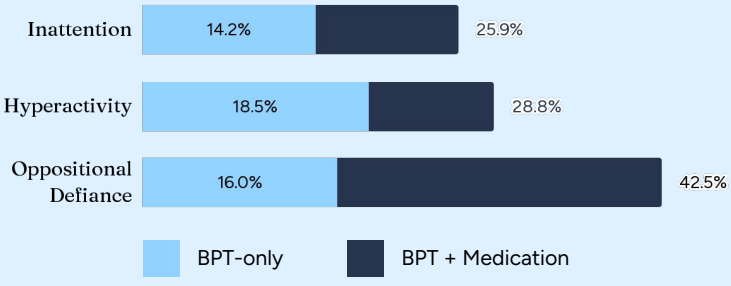
PARENT-REPORTED SYMPTOM IMPROVEMENT vs BENCHMARK



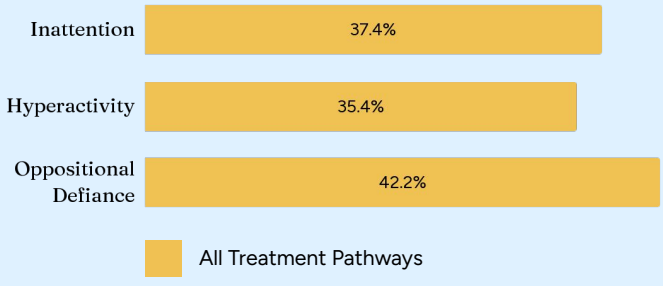
Standardized effect size (d); higher values indicate more symptom improvement

Achieving outcomes that exceed rigorous published meta-analytic benchmarks is a ***meaningful validation of the high quality care*** delivered in Clarity's real-world clinical setting.

PARENT-REPORTED SYMPTOM IMPROVEMENT (n= 176, *** p<0.001)



TEACHER-REPORTED SYMPTOM IMPROVEMENT (n= 72, *** p<0.001)



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.

Early Preview

Our Anxiety Program

1,590 patients since our September 2025 launch

Since launching in September 2025, Clarity's anxiety program has served nearly 1,600 patients, including evaluation visits. Supportive Parenting for Anxious Childhood Emotions (SPACE) and the Teen Anxiety Program (TAP) are our primary behavioral health programs, and we also provide medical management.

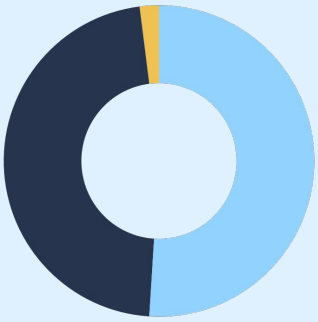
Early family-reported results are strong: 90% of families said their management of anxiety symptoms improved, and 95% described Clarity as having a large impact on their lives. Youth- and parent-reported change on validated anxiety and depression measures is still being finalized and will be reported in the next review cycle.

ANXIETY PATIENTS

1,590 patients | Mean age = 11

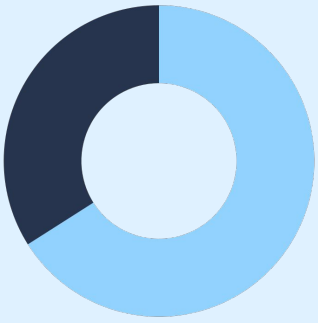
Gender (%)

- Female · 51%
- Male · 47%
- Other · 2%



Program Type (%)

- Child SPACE · 66%
- Teen TAP · 34%



76% **Average group participant attendance across sessions**

SURVEY RESULTS (n=58)

90%

Of families reported management of anxiety symptoms improved

95%

Of families said Clarity had a large impact on their lives

PRIMARY OUTCOMES

Coming Soon

OUTCOME DATA IN PROGRESS

Youth and parent reported change in anxiety symptoms (GAD-7, PROMIS-Anxiety scales) and depressive symptoms (PHQ-9, Short Mood and Feelings Questionnaire SMFQ) are expected to be reported in the next review cycle.

Early Preview

Our Obesity Program

The newest service line at Clarity Pediatrics

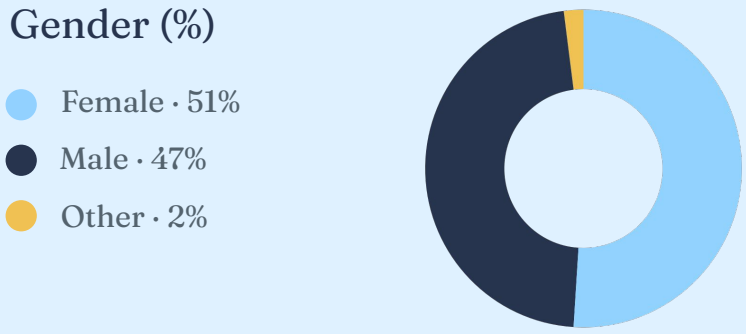
Clarity's Overweight and Obesity treatment program launched in April 2026, delivering Positive Parenting for Healthy Weight family-based therapy (FBT) in groups. Families also receive ongoing medical management, including prescribing of anti-obesity medications such as GLP-1s, where indicated.

Since the program is so new, this section provides only an initial picture based on data captured from April 27 through August 31, 2026. The program received nearly 700 referrals over its first 4 months and is seeing 70% group attendance, an early signal of strong engagement. Full outcome reporting with clinical measures (BMIz and FNPA) will be shared in a future report.

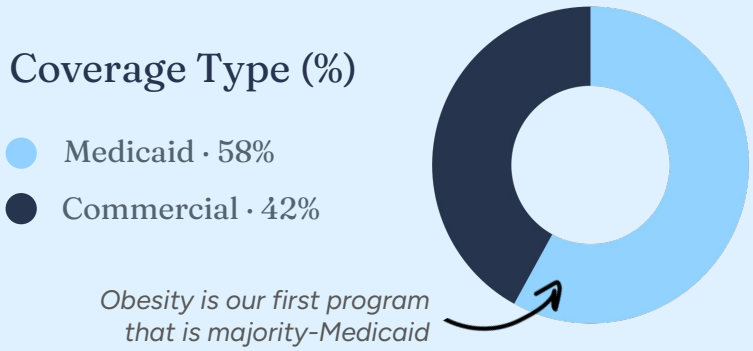
OBESITY PATIENTS

677 referrals | Mean age = 12

Gender (%)



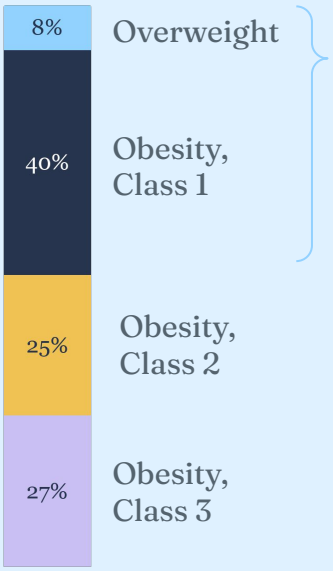
Coverage Type (%)



Obesity is our first program that is majority-Medicaid

70% **Average group participant attendance across sessions**

CLINICAL SEVERITY



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

We've heard from many referrers that early-stage patients have nowhere else to go and often fall through the cracks.

PRIMARY OUTCOMES

Coming Soon

OUTCOME DATA IN PROGRESS

We recently launched this program and are in the process of collecting outcomes. Metrics like BMI and Family Nutrition & Physical Activity (FNPA) are expected to be reported in a future review cycle.

Feedback *from* Our Referring Providers

More than 2,000 referring providers trust Clarity

Clarity's care model is designed to complement the pediatric medical home, serving as an extension of a pediatrician's practice. Feedback from referring providers ensures we improve communication, ease administrative workloads, and build the trust needed to recommend Clarity to colleagues and parents. Clarity also supports flexible referral pathways, allowing providers to refer for behavioral care, medical management, or both while maintaining the level of ongoing involvement that best fits their practice and the needs of each family.

2,300

Providers refer to Clarity across California and Texas. We are launching new states soon.

62%

Of referring providers heard about Clarity through a colleague, highlighting the trust we've built through the quality of our clinical care.

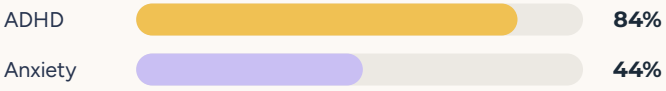
85%

Primary care providers are satisfied with Clarity
From a June 2026 survey of referring providers (n=45)

70%

Say coordination burden improved since referring
From a June 2026 survey of referring providers (n=45)

REFERRAL RATES BY PROGRAM



From a June 2026 survey of referring providers (n=45): percent who refer to Clarity for each condition (multi-select)

PROVIDER VOICES

> *Clarity has been an absolutely amazing resource for my patients, and I am so grateful for everything it has to offer.*
>
> **— Pediatrician**

> *We have a BPT program, but we still refer to Clarity, because I'm confident in the program, it's robust, wait times are alright, they take insurance; it's complementary in my opinion, there's always a need for this. Love what you guys do!*
>
> **— Developmental-Behavioral Pediatrician**

> *The referral process has been simple, families have had positive experiences, and communication has been excellent, which has made it easy to continue referring.*
>
> **— Family Nurse Practitioner**

Interested in a role at Clarity?

CLARITY PEDIATRICS

Many providers on the Clarity team were originally referring providers! We have full-time and part-time roles for both medical & behavioral health clinicians.

Visit → claritypediatrics.com/careers

Family Insights

Care quality & community

84% of parents are “very likely to recommend Clarity services to a friend”

90%
Clarity had a large impact on their lives

95%
BPT Improved ADHD parenting understanding

97%
Dx & treatment plan are clear & easy-to-understand

98%
Provider listened with empathy

94%
Provider effectively addressed questions

80%
Average BPT group attendance

Source: Parent NPS surveys post-treatment visit, n=1,355.

> *Clarity has changed the relationship between my son and I. I do believe it has helped him so much. Applying everything I learned to help him has definitely helped me be a better parent."*
>
> — Clarity Parent, ADHD BPT group

> *Connecting with Clarity ... has been life-changing for our family. I highly recommend them — they are so supportive and amazing to communicate with."*
>
> — Clarity Parent, ADHD medical care

> *I had a great experience. I learned a few tools that really helped my day to day life. Knowing our family is not the only one struggling has been eye opening."*
>
> — Clarity Parent, ADHD BPT group

> *The movement, what's going on our plate, and planning around those things — those have been changes that we've maintained."*
>
> — Clarity Parent, obesity group

> *The caring, patient, responsive, heart of the Clarity team has made all the difference for our son.”*
>
> — Clarity Parent, ADHD medical care

> *Clarity Pediatrics has provided guidance and skills that have helped my child navigate anxiety and social challenges with increasing confidence.*
>
> — Clarity Parent, teen anxiety group

Payers & Access

Coverage includes Medicaid

Access is the cornerstone of our care model. From day 1, we prioritized affordability and coverage, including Medicaid, so more children can receive evidence-based chronic care without unnecessary financial or administrative barriers. ADHD outcomes showed no significant difference between Medicaid and commercially insured patients, an important measure of equity in clinical results.



California

5.5M+ pediatric lives covered

- aetna
- Alameda Alliance for Health
- Anthem
- blue california
- blue california Promise Health Plan
- BlueCross BlueShield
- CalOptima Health
- cigna healthcare
- Contra Costa Health
- Gold Coast Health Plan
- health net
- HealthPlan of San Mateo — Healthy is for everyone
- L.A. Care Health Plan
- Partnership HealthPlan of California
- San Francisco Health Plan
- Santa Clara Family Health Plan
- TRICARE
- United Healthcare
- Central California Alliance for Health



Texas

4M+ pediatric lives covered

- aetna
- cigna healthcare
- BlueCross BlueShield of Texas
- Baylor Scott & White Health Plan
- Wellpoint
- superior healthplan
- TRICARE
- United Healthcare

AVERAGE COPAY

Clarity handles all prior authorizations for families as well

$25	$0
Commercial	Medicaid

SELF-PAY

For patients without coverage, we offer among the lowest self-pay rates in the country for our services

$70

Self-Pay

Clinical Leadership Team

Our team comprises leaders in Medicine & Behavioral Health

ALESANDRO LARRAZABAL, MD, FAAP
CO-FOUNDER & CHIEF MEDICAL OFFICER



As co-founder and Chief Medical Officer of Clarity Pediatrics, Dr. Alesandro Larrazabal combines a passion for medical innovation with clinical expertise to improve care for children with chronic conditions, regardless of insurance coverage, language, or country of origin. Dr. Larrazabal is a proud immigrant of Guatemala, a pediatrician and pediatric interventional cardiologist with advanced training in medical innovation through the Stanford Biodesign Innovation Fellowship. He previously built the Pediatric Interventional Cardiology Program at Kaiser Permanente Northern California, a healthcare network with more than 4.5M members, serving as the program's first Medical Director. Dr. Larrazabal trained at UCSF and Texas Children's Hospital, and completed a postdoctoral research fellowship at Boston Children's Hospital, Harvard Medical School.

ERIN SCHOENFELDER GONZALEZ, Ph.D.
VICE PRESIDENT, CLINICAL INNOVATION



As Vice President of Clinical Innovation at Clarity Pediatrics, Dr. Erin Schoenfelder Gonzalez combines clinical expertise with a passion for advancing evidence-based care for children with chronic conditions. A clinical psychologist and nationally recognized researcher, she leads Clarity's clinical innovation and outcomes research, translating scientific evidence into scalable care models that improve patient outcomes. Dr. Schoenfelder Gonzalez has authored more than 100 peer-reviewed publications and presentations focused on pediatric behavioral health, implementation science, and integrated care. She earned her Ph.D. in Clinical Psychology from Arizona State University and completed her clinical internship and postdoctoral fellowship at Duke University Medical Center.

ALICIA EGGEN, MA, LMFT
SENIOR DIRECTOR,
BEHAVIORAL HEALTH SERVICES



As Senior Director of Behavioral Health Services at Clarity Pediatrics, Alicia Eggen leads the development and delivery of evidence-based behavioral health programs for children and families. A licensed Marriage and Family Therapist, she has dedicated her career to expanding access to high-quality behavioral healthcare through innovative care models grounded in clinical science. Alicia specializes in parent-mediated interventions for ADHD and anxiety and partners closely with multidisciplinary teams to translate evidence-based treatments into scalable, family-centered programs. She earned her Master's degree in Marriage and Family Therapy from the University of San Diego.

ALEJANDRA VARGAS, MD, FAAP
SENIOR MEDICAL DIRECTOR



As Senior Medical Director at Clarity Pediatrics, Dr. Alejandra Vargas leads the organization's team of pediatric medical providers, delivering evidence-based chronic care for children and families. A board-certified pediatrician, she partners with multidisciplinary teams to integrate behavioral health and medical treatment into comprehensive, family-centered care. Bilingual in English and Spanish, Dr. Vargas brings a cultural lens to patient care and is committed to expanding access to high-quality pediatric chronic care for diverse families. She earned her medical degree from Louisiana State University School of Medicine in Shreveport and completed her pediatric residency at UTHealth Houston McGovern Medical School.

Data & Findings Notes

Interpretation, limitations, and future directions

INTERPRETATION · CLINICAL FINDINGS

Clarity's outcomes reflect a virtual chronic care model delivering clinically meaningful results at scale. Data from August 2024 through August 2026 confirm both preliminary clinical effectiveness and an exceptional patient experience. Parent and teacher ratings of ADHD and ODD symptoms improved significantly after BPT and/or medication. An independent multivariate analysis found no significant difference in ADHD outcomes by insurance type after accounting for baseline severity, treatment pathway, age, and gender. High BPT attendance and strong parenting skill gains signal deep family engagement — a key predictor of sustained behavioral outcomes.

LIMITATIONS · STUDY CONSTRAINTS

This real-world quality improvement review lacks a randomized control group and is subject to self-selection bias — families completing reassessment may represent more engaged patients. Clinical follow-up varies from immediately after group completion to several months later, and parent- and teacher-reported analyses do not necessarily reflect the same patients. Directly comparable published pre/post benchmarks from meta-analyses for combined behavioral and medication treatment are limited.

FUTURE DIRECTIONS · PERSONALIZED CARE

Today's evidence tells us what works on average. Our ambition is to build the evidence that helps clinicians choose the treatment most likely to work for the child sitting in front of them. As our understanding of our patient population continues to grow, we will combine longitudinal clinical outcomes with real-world care, allowing us to better understand which treatment pathways produce the best outcomes for different children and families. We believe those insights have the potential to improve clinical decision-making and make pediatric chronic care more personalized than it is today.

Sources & Citations

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