



2025 Annual Report Policy

School-Based Health Care Coordination Initiative

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Section 1: Project Progress and Results

Q1: Please provide information regarding the current period's overall progress toward achieving the investment outcomes, as well as the work planned or anticipated for the next period.

Deliverables (Y1-Y4):

- Achieve eligible Medicaid reimbursement for SBHC care coordination in all four states (Texas, Illinois, Georgia, and Florida).
- Launch and maintain a highly engaged national partner advisory group, which will provide tangible access to state-level members and constituencies and contribute subject matter expertise to drive the national strategy to advance and support the sustainability of SBHC Care Coordination. (completed May 2024)
- Identify and launch highly engaged state-level affinity groups that will provide specific recommendations for the implementation initiative and identify measurable outcomes of interest to CMS. (expected launch October/November 2025)
- In states where an administrative strategy is not feasible, we will devise and implement a strategic legislative and political strategy in collaboration with the Vogel Group and Medicaid consultants. (Strategizing is ongoing)
- Lay the groundwork and establish a precedent for creating similar policies throughout the initiative—TBD state by state.
- Year 1: November 1, 2023-September 30, 2024
- Year 2: October 1, 2024-September 30, 2025
- Year 3: October 1, 2025-September 30, 2026
- Year 4: October 1, 2026-September 30, 2027

Q2: For each outcome that is behind schedule or under target, explain what adjustments you are making to get back on track.

Year 2 – SBHCC Policy Design & Implementation Planning: on time with no-cost extension in place

- Develop and maintain a highly engaged national partner advisory group, which will provide tangible access to state-level members and constituencies and contribute subject matter expertise to drive the national strategy to advance and support the sustainability of SBHC Care Coordinators.
- Outcomes through July 2025:
 - The School-Based Health Care Coordination Policy Work Group (the Policy Work Group) met a total of 15 times throughout the report timeframe to continue to set priorities and establish critical relationships and alignment with national and state partners to carry out reimbursement and sustainability strategies in the four states. (July 2024–June 2025)
 - This Policy Work Group includes:
 - Dr. Richard Antonelli is the Director of Integrated Care at Boston Children's Hospital, offering care coordination management for people with complex needs, especially those transitioning from child to adult care delivery. Dr.

Antonelli sits on the SBHCC Program Initiative and connects the development of the overall initiative and data and evaluation activities to the policy workgroup.

- Dr. Jeff Schiff is a pediatrician and senior scholar at Academy Health. He focuses on improving outcomes for those with limited resources. His work includes using policy and implementing quality improvement to interface with payment mechanisms to fundamentally change healthcare systems. He served as the Chief Medical Officer for the Minnesota Department of Human Services from 2006 to 2019.
- Dr. Andrey Ostrovsky is a pediatrician and the former chief medical officer of the U.S. Medicaid program. He is now the managing partner at Social Innovation Ventures, where he invests in and advises companies and nonprofits dedicated to eliminating disparities. He also advises federal and state regulators on incorporating human-centered design into policymaking.
- The FrameWorks Institute is an independent, nonprofit organization that conducts rigorous, multi-disciplinary, multi-method communications research to identify the most effective ways of framing social issues and policy solutions. The FrameWorks Institute will craft the communications strategy, ensuring effective messaging and stakeholder engagement.
- Vogel Group is an international government affairs and consulting firm headquartered in Washington, DC, providing expertise in policy, legislative, and regulatory landscapes at the federal and state levels.
- School-Based Health Alliance is the national voice for school-based health care, working to improve the health of children and youth by advancing and advocating for school-based health care. The Alliance staff runs the Policy Work Group, providing strategic direction and support and facilitating meetings, work sessions, and partnership engagement. The staff brings over 30 years of school-based healthcare experience, nonprofit management, and governmental affairs experience to the SBHCC initiative. Staff on the SBHCC Policy Initiative include:
 - Robert Boyd, CEO and President
 - Tammy Alexander, Sr. Vice President of State Relations
 - Jacquelyn Christianson, Sr. Vice President of Quality, Research, and Evaluation (also facilitates the SBHCC Program Data and Evaluation Work Group)
 - Zach Scott, Senior Director of Policy
 - Kristen Smith, Policy Associate
- SBHA continues to engage with other consultants and national stakeholders who help inform the strategic planning and gather relevant information for the work. These include:
 - National Association of Community Health Centers
 - Anne Dwyer, Associate Research Professor at the Georgetown University McCourt School of Public Policy's Center for Children and Families
- The Policy Work Group developed a framing document that captures many relevant arguments supporting the adoption of care coordination reimbursement in states. This document highlights the positive impact of care coordination on various health indicators (depression, behavioral health, etc.), provides message framing based on different audiences and factors, lists the project's performance measurements and outcomes to share with external stakeholders, and presents data

collected on the impacts of care coordination in one place to make it easily shareable with decision-makers. (April 2025-May 2025)

- Access to federal Medicaid funds may significantly impact states' eagerness to allow reimbursements for care coordination. H.R.1 went through several different iterations that included different possible impacts on the Medicaid funds that states receive. The Policy Work Group focused on impacting H.R.1 in a variety of ways to reduce proposed Medicaid cuts from the federal government, including:
 - Meeting with legislators and their staff to oppose proposed cuts to Medicaid in H.R.1. Members of the Policy Work Group met a total of 17 times with staff or legislators from the offices below (November 2024-June 2025):
 - Sen. Lisa Murkowski (AK)
 - Sen. Todd Young (IN)
 - Sen. Mitch McConnell (KY)
 - Sen. Shelley Moore Capito (WV)
 - Sen. John Cornyn (TX)
 - Sen. Susan Collins (ME)
 - Rep. Riley Moore (WV-02)
 - Sen. Katie Britt (AL)
 - Rep. Jimmy Gomez (CA-34)
 - Rep. Ayanna Pressley (MA-07)
 - Sen. Josh Hawley (MO)
 - Sen. Mark Kelly (AZ)
 - Sen. Angela Alsobrooks (MD)
 - Sen. Jim Justice (WV)
 - Rep. Buddy Carter (GA-01)
 - The Policy Work Group aided Senator Josh Hawley and Senator Ron Wyden's offices in crafting an amendment that would have barred any cuts to the Medicaid program in H.R.1. The amendment was introduced and failed in the Senate 49-50. (April 2025)
 - Members of the Policy Work Group worked with the School-Based Health Alliance's communications staff to launch the organization's first digital campaign. The campaign targeted parents in Republican legislators' districts to solicit their support for opposing reductions in Medicaid funding in H.R.1, and raise awareness about the positive impact of school-based health centers. (January 2025-May 2025)
 - The campaign had 12 million views on Meta platforms
 - The campaign had 2.7 million views via Google searches
 - The ads were clicked on more than 55,000 times
 - The ads led to more than 34,500 visits to the campaign website
 - The campaign had significant impacts in the states with targeted Republicans:
 - West Virginia – 358,206 individuals reached with 840,505 impressions
 - Utah – 379,674 individuals reached with 887,062 impressions
 - Alaska – 416,569 individuals reached with 986,370 impressions
 - Indiana – 510,081 individuals reached with 1,125,849 impressions
 - Maine – 467,837 individuals reached with 985,990 impressions

- Nationwide – 5,178,819 individuals reached with 10,435,325 impressions
- The Policy Work Group initiated draft language for developing the State Affinity Groups to ensure state-level Medicaid knowledge and relationships to address state-specific opportunities and challenges. (June 2025 – Present – expected launch in October/November 2025)
- The Policy Work Group researched and collected data on the legislative calendar and key legislators for each state involved in the campaign to aid in crafting legislative engagement plans, if necessary, for states to adopt reimbursement for care coordination. (February 2025-April 2025)
- Members of the Policy Work Group attended the National Alliance of Medicaid Directors Fall Conference to establish connections with Medicaid Directors in the four priority states. (November 2024).
- The Policy Work Group developed language highlighting the positive impacts of care coordination for the Centers for Medicaid & Medicare Services (CMS) for its new guidance on “Best Practices for Adhering to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Requirements.” Members of the Policy Work Group engaged directly with CMS staff to have the language included in the final guidance. (July 2024-October 2025)
- Initiating the development of state-specific work plans based on each state's landscape analysis and needs. (July 2025 – Present)
- We will continue to work with the Data and Evaluation Work Group to examine data points (domains and measures) to align policy objectives with program data collection requirements. (July 2024–Present)
- We will continue to work with the SBHCC Program Initiative to determine city-state-specific opportunities and challenges, ensuring targeted strategy development and implementation. (July 2024–Present)
- Presentations on the project's policy arm's work were conducted with care coordinators from the programmatic arm of the project to help them understand policy impacts on their work. (April 2025-June 2025)
- Frameworks continue to provide expertise and work with SBHA to develop messaging for the four cities and states. (July 2024 – Present)
- SBHA convened a meeting with its national partner advisory group to discuss the issues facing their members in the field, to better understand the new Administration's impact on their operations, and how it could impact the initiative. (January 2025)
- SBHA consulted with the Policy Working Group and Pivotal to decide not to continue policy work in Florida due to ongoing implementation issues of the programmatic side in the state and policy issues. (January 2025)

- SBHA staff created a plan for care coordination reimbursement in West Virginia and New Mexico to continue with Pivotal support if federal funds from the Office of Minority Health are impacted by the Administration's ongoing efforts to reduce federal investments. The plan was shared and reviewed by Pivotal and approved by Pivotal staff. SBHA will notify Pivotal staff if it's necessary to enact this plan. (March - April 2025)
- SBHA staff met with other Pivotal Philanthropies grantee, Inseparable, to find common areas of collaboration between the organizations and share insights into state policy work and plan a future meeting with the leadership of the organization and plan a future meeting with the leadership of the organizations. (June 2025)

Year 3-4 – Continuous Improvement, Implementation, and Scalability

- SBHA and Inseparable leadership met with one another, at Pivotal's recommendation, to share information related to ongoing projects. Staff and leadership for both organizations shared strategies and information to aid one another in their work. (July 2025)
- Members of the Policy Work Group attended the Education Commission of the States National Policy Forum to establish connections with state legislators and staff in the priority states. Members of the Policy Work Group connected with state legislators in Texas and Illinois and state agency staff in Georgia. (July 2025)
- The Policy Work Group has connected with staff from the National Governors Association to share information regarding the initiative and gain their insight on best practices for engaging agency staff in priority states. (July 2025)
- Maintain the National Partner Advisory Committee, which will provide tangible access to state-level members and constituencies and contribute subject matter expertise to drive the national strategy to advance and support the sustainability of SBHC Care Coordinators.
- Develop alignment strategies with additional partners in the Medicaid and policy landscape to stay abreast of opportunities at the state and federal levels. (July 2025 – Present)
- Continue developing and implementing the State Affinity Groups, refining the charter document outlining the state-level groups' purpose and responsibilities, and establishing a member recruitment process for launching in October/November 2025.
- Update the state-level organization research and relationship mapping discussions to include input from health care and educational partners to identify potential state-level partners.
- Develop Individual State Work Plans for Policy and System Change.
- Members of the Policy Working Group will attend the National Association of Medicaid Directors 2025 Fall Conference to re-engage Medicaid directors in our priority states to discuss reimbursement for care coordination. SBHA will also be hosting its own happy hour to provide direct access to Medicaid directors outside of the scheduled conference schedule to improve opportunities for engagement. (November 2025)
- Ongoing work:
 - Periodic update of the state political landscape analysis
 - Three-state Medicaid analysis, including proposed impacts of H.R.1 on state Medicaid programs
- Annual progress report due to Pivotal Philanthropies – 08/15/25
- Annual progress report due to Pivotal Philanthropies – 08/01/26
- Annual progress report due to Pivotal Philanthropies – 08/01/27

Q3: Provide one to three ways Pivotal Ventures has successfully enabled your work so far.

Pivotal understands the critical role that policymakers play in our work. It encourages and supports our work with them, which is unusual, as most funders prohibit policy work as part of their grant.

- Pivotal staff does not meddle in our work; some funders do.
- Your support has opened many other doors for us. Thank You.

Q4: Provide one to three ways Pivotal Ventures can improve.

Continuing to support SBHA's work and connecting SBHA with Pivotal Ventures' partners and external relationships will be very helpful as the initiative enters its next phase.

Section 2: Budget Update

Budget Update

If there have been any updates to your budget, please provide information below. Together, the budget and information you provide below should offer a clear picture of any variances to the approved budget.

Please provide an updated project budget and upload to the Files tab.

See the attached budget report.

Q1: Briefly describe how total project spending to date compares against the original budget and how your assumptions may have changed as the project progressed.

The School-Based Health Care Coordination policy initiative is on track to spend down remaining funds over the next two years.

Q2: Current Period Variance: Provide explanation for any cost category variances outside the allowable range.

Due to ongoing uncertainty surrounding state Medicaid programs due to federal policy implications from H.R.1, states have hesitated to consider any changes to their Medicaid programs. The hesitation has impacted the policy initiative's ability to engage these state policymakers actively. States are now examining the new landscape and its impact on their Medicaid programs. The delay in state consideration has led the School-Based Health Alliance to request a no-cost extension for one year to provide ample time for the initiative to engage the states for care coordination reimbursement. This no-cost extension was presented to Pivotal Ventures staff in June 2025 and was verbally agreed upon. The no-cost extension would stretch this program to four years rather than the originally agreed-upon three.

Q3: Total Gift Variance: Provide explanation for any cost category variances outside the allowable range.

Not applicable

Q4: List and describe any sources of in-kind project support or resources received in the current period (if applicable).

The School-Based Health Alliance generated \$46,241 in interest income through our account with Merrill Lynch. In accordance with the requirement, these funds will be used to support the Initiative.

Q5: Sub-Awards

Not applicable
