

—— 2025 ——

Meaningful Medicine

Annual Report



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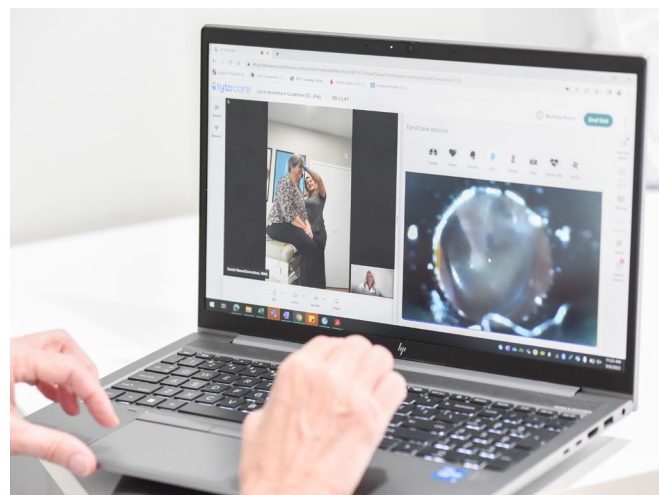


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Kieth Cockrell
President

Bank of America,
Charlotte

A message from the President of Bank of America, Charlotte

Meaningful Medicine: Four Years of Transformative Impact

In 2022, we announced an audacious initiative — the Meaningful Medicine program — in partnership with Atrium Health and Charlotte-Mecklenburg Schools. Together, we set ambitious goals to improve access to mental and physical health care, strengthen education and expand pathways to workforce development and economic opportunity.

Now in year four of our five-year plan, I am proud to share that we have achieved every milestone set, surpassing the benchmarks established at the program's launch. Our partnership continues to evolve with Atrium Health, a recognized leader in the healthcare field, as we work hand-in-hand to create lasting, systemic change across our communities. The impact of Meaningful Medicine continues to resonate deeply across the region — addressing health, education, and workforce disparities while advancing economic mobility and sustainability in historically underserved neighborhoods. By fostering a healthier, more equitable community, we are helping to unlock potential and pave the way for brighter futures.

Bank of America's \$10 million investment reflects our ongoing commitment to advance economic opportunity and sustainability. When businesses and communities work together, we are able to overcome any challenge and drive innovative solutions delivering deep impact and broad progress. I want to extend genuine appreciation to every partner, staff member and volunteer who has dedicated their leadership and passion to Meaningful Medicine. Thank you for being catalysts for change, for your steadfast collaboration and for your exceptional partnership. As we enter the final phase of our five-year plan, let us continue to build on this momentum and look forward to the transformative outcomes still ahead for our communities.

Kieth Cockrell

A letter from the Senior Executive Vice President, Chief Consumer & Social Impact Officer of Advocate Health

At Advocate Health, our commitment to health access is inseparable from our vision for social and economic mobility. Meaningful Medicine exemplifies how multi-sector collaboration can drive sustainable, community-centered impact.

When we launched this program, our goal was clear: to close longstanding health and opportunity gaps through focused, community-led innovation. Three years later, I can say with confidence we are delivering on that promise.

Through school-based care access and workforce development opportunities, we are addressing the systemic drivers of poor health while creating pathways to brighter futures. This work directly supports our Social Impact Strategy - rooted in access and opportunity - and reflects our mission to advance health beyond the walls of our facilities.

I extend deep gratitude to every partner, provider and teammate who has contributed to this work. Together, we are building a model of what meaningful, scalable impact truly looks like and, more importantly, delivering a renewed hope for everyone we have the privilege of serving through Meaningful Medicine.

I am so incredibly proud of what we've accomplished and even more energized by what lies ahead.



Kinneil Coltman, DHA



Kinneil Coltman, DHA

Senior Executive Vice
President,
Chief Consumer & Social
Impact Officer

Advocate Health



Dr. Crystal L. Hill
Superintendent

Charlotte – Mecklenburg
Schools

A letter from the Superintendent of Charlotte- Mecklenburg Schools

Meaningful Medicine is a transformative program at Charlotte-Mecklenburg Schools. It has made a significant impact across our school buildings and with our students, families and staff. The partnership with Atrium Health, and funding from Bank of America, provided us a unique opportunity to bring an innovative idea to fruition – one that increases access to healthcare services available to students and staff and provides virtual connectivity to leading behavioral specialists in school – during school hours. This initiative also is preparing the next generation of healthcare leaders through its work-study platforms and summer programs for CMS high school students.

Meaningful Medicine creates endless possibilities for how a school system can work across the public, private and not-for-profit sectors to achieve a common goal, accelerating positive student outcomes in underserved communities and across the Charlotte-Mecklenburg area. Simply put, this initiative is a gamechanger that is helping to close the achievement gap through health and wellness services, reducing absenteeism amongst staff and students, and educating students to various roles within the healthcare sector to support their futures and create workforce pathways.

Strengthening educational opportunities through health and wellness is the power of this program as improved student outcomes can lead to healthier and economically stable communities over time. We are incredibly grateful to Atrium Health and Bank of America for this partnership and for the opportunity to support our students, staff and community.

Dr. Crystal L. Hill

Crystal L. Hill, Ed.D.

A letter from President/CEO of YMCA Greater Charlotte

At the YMCA of Greater Charlotte, we believe that health and well-being are strengthened through meaningful partnerships that meet people where they are. Our collaboration with Atrium Health through the Meaningful Medicine program is a powerful example of this shared commitment to advancing health equity and holistic care.

By offering community-based virtual care clinics at our Simmons and McCrorey YMCAs, we are removing barriers to care and reaching individuals and families who might otherwise go without essential health services. These clinics are more than a convenience – they are a vital lifeline, helping us promote preventative care and improve health outcomes in communities that need it most.

This year, we are especially grateful for the addition of suicide prevention training for YMCA staff, which equips our teams to support youth and adults in moments of need and strengthens mental health resilience across our programs. With upcoming sessions planned for our camps and youth leadership initiatives, this work extends into spaces where young people learn, grow, and thrive.

Together with Atrium Health, we are creating supportive experiences across generations that foster connection, promote holistic health, and build a stronger, healthier Charlotte for all.



Sue Glass



Sue Glass
President/Chief Executive
Officer

YMCA of Greater
Charlotte



Pooja Palmer

Portfolio Strategy and
Special Projects Manager

National Center for Clinical
and Community Impact,
Advocate Health

From Meaningful Medicine's Portfolio Strategy Manager

"Meaningful Medicine demonstrates the power of community collaboration and corporate social responsibility. Now in its third year, the program brings together Bank of America, Atrium Health, Charlotte-Mecklenburg Schools, Mecklenburg County, the YMCA of Greater Charlotte, Inlivan Housing, Latin American Coalition, and Central Piedmont Community College to expand access to care and strengthen community health.

Over the past three years, the initiative has grown significantly, reaching thousands of residents with essential health services, education, and resources. These measurable outcomes underscore the effectiveness of our collective efforts and the dedication of partners who make this work possible.

We are especially grateful to Bank of America, whose steadfast support and leadership continue to play a critical role in advancing health access across Mecklenburg County – For All."

From Meaningful Medicine's Senior Evaluation Scientist

"Meaningful Medicine exemplifies the collective impact of cross-sector collaboration. By grounding this initiative in robust, timely and actionable data, we enable thoughtful implementation, accelerate meaningful growth, and deliver on transformative, measurable impact. Equipped with data, our team can make real-time decisions about service delivery and program development. Meaningful Medicine's commitment to continued evaluation further promotes transparency and accountability to our partners and community, ensuring we deliver on our collective priorities and promises.

Thank you to our data partners, without whom this report would not be possible; to our operational teams and community partners, who work exceptionally hard to provide these programs; and to our patients, who are reflected in these data and for whom we do this work. It is a privilege to share their stories.

I hope as you read this report, you'll agree that the data speaks for itself – Meaningful Medicine is driving measurable improvements in health outcomes, healthcare access, and workforce development opportunities for all."



Rachel George

Senior Evaluation
Scientist

National Center for Clinical
and Community Impact,
Advocate Health

ACKNOWLEDGEMENTS

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We also extend a special thanks to the frontline contributors whose participation, dedication, and passion enable the success of Meaningful Medicine.

- Charlotte – Mecklenburg Schools principals, staff, and school nurses
- Atrium Health telepresenters, therapists, community health workers, and referral navigators
- Atrium Health Impact Evaluation and Grants Management teammates



BANK OF AMERICA



Acronyms and Definitions

AWV: Annual Wellness Visit

CHW: Community Health Worker

CMS: Charlotte-Mecklenburg Schools

CVPC: Community Virtual Primary Care

CPCC: Central Piedmont Community College

ED: Emergency Department

FTE: Full-time Employees

GAD-7: Generalized Anxiety Disorder 7

LAC: Latin American Coalition

PATCH: Propelling Adolescents Towards Careers in Healthcare

PCP: Primary Care Provider

PHQ-9: Patient Health Questionnaire 9

QPR: Question, Persuade, & Refer

SBVC: School-Based Virtual Care

SBVT: School-Based Virtual Therapy

SDOH: Social Drivers Of Health

WFD: Workforce Development

Emergency Department Visit, Avoidable: Visits for health concerns that can be treated by a healthcare provider outside of the emergency department, or if treated sooner would not have required emergency department care. Example: Asthma.

Emergency Department Visit, Unavoidable: Visits for health concerns that required emergency department utilization, where a delay of care would increase the likelihood of an adverse outcome. Example: Appendicitis.

Meaningful Medicine Program Year 1: August 29, 2022, to August 27, 2023

Meaningful Medicine Program Year 2: August 28, 2023, to August 25, 2024

Meaningful Medicine Program Year 3: August 26, 2024, to August 24, 2025

Historically Underserved Communities: Individuals who have been systematically denied access to healthcare, which includes people who identify as Black or African American, Hispanic or Latino, American Indian or Alaska Native, Middle Eastern or North African, or Asian.

Communities with Financial Barriers to Healthcare: Patients using Medicaid insurance or who are uninsured.

Patient: Someone with a documented virtual care visit during the program year.

Social Drivers Of Health (SDOH): The conditions where people are born, live, learn, work, play, worship, and age that affect health, functioning, and quality of life outcomes.





Meaningful Medicine Overview



Meaningful Medicine is a comprehensive, cross-sector collaboration between Bank of America, Atrium Health, Charlotte-Mecklenburg Schools, the YMCA of Greater Charlotte, Mecklenburg County, Latin American Coalition, Inlivan Housing, and Central Piedmont Community College. As an ambitious multi-system partnership, **Meaningful Medicine** aims to improve access to care and economic mobility among historically underserved community members through school- and community-based programs in Mecklenburg County.

Supported by a generous \$10 million corporate donation, Bank of America enabled Advocate Health to launch **Meaningful Medicine**, two programs aligned under the Atrium Health Social Impact Strategy and designed by our Community Health and Clinical Care Service Lines to work in tandem to support health access and to grow the next generation of healthcare workers in our community:

1. **Meaningful Access:** An innovative healthcare access and workforce development model serving the most vulnerable populations within Mecklenburg County through virtual care (telemedicine) clinics at Charlotte-Mecklenburg Schools and easily accessible community sites to target improved access for vulnerable community members. Workforce development programming to create sustainable pathways to meaningful employment and economic mobility.
 - **School-Based Virtual Medical Care**
 - **School-Based Virtual Therapy**
 - **Community Virtual Primary Care**
 - **Workforce Development**
2. **Meaningful Connections:** Holistically addresses Social Drivers of Health through a robust Social Health strategy led by Community Health Workers residing in and supporting our most at-risk communities. Suicide prevention training delivered by Atrium Health to enhance mental health crisis support in Charlotte-Mecklenburg Schools and the broader Charlotte community.
 - **Social Drivers of Health Screening & Referrals**
 - **Question, Persuade & Refer Training**



COMMITMENT



CURRENT STATUS

Provide critical **school-based virtual medical care** to students and staff in high-need CMS schools



5 Year Goal: 50 Schools

Progress: 113 Schools

Provide **critical mental health care** for students at high-need CMS schools



5 Year Goal: 31 Schools

Progress: 31 Schools

Offer **community virtual medical** care for vulnerable populations at Central Piedmont Community College (CPCC) and 2 YMCA locations for a total of 3 community sites



5 Year Goal: 3 Sites

Progress: 5 Sites

Support **workforce development opportunities** through a multi-year talent pipeline: PATCH>> Internship>> Rise to Success



5 Year Goal: 140 Students

Progress: 279 Students

Expanded Goal: 380 Students

Propelling Adolescents Towards Careers in Healthcare, (PATCH) is a 16-week curriculum of exposure to healthcare careers through professional development



5 Year Goal: 200 Students

Progress: 132 Students

Internships provides 7-week non-clinical paid experiences that include project-based learning and upskill training



5 Year Goal: 120 Students

Progress: 71 Students

Rise to Success is a 3-year program for graduating high school seniors enrolled in an Associate's degree program in a healthcare related field



5 Year Goal: 70 Students

Progress: 76 Students

Create an academic curriculum and training for Certified Medical Assistance (CMA) Telemedicine



Trained: 97 Students



COMMITMENT



CURRENT STATUS

Provide connections to resources and wrap around support for social drivers of health (SDOH) needs. SDOH are factors that cause poor health, like lack of safe housing, unemployment, or inability to access healthy food



5 Year Goal:

- Screen students and community members for SDOH needs across Meaningful Access connection points
- Risk stratify patients and connect to resources through the Community Resource Hub
- Enroll high-risk members with Community Health Worker (CHW)

Progress:

- ✓ **Integrated SDOH screening** into clinical workflows
- ✓ Receiving referrals and connecting community members to resources
 - ✓ **7,861 community members screened**

Deliver an evidence-based suicide-prevention curriculum that teaches participants how to recognize warning signs of suicide crisis and how to respond



5 Year Goal:

- Train 5 Atrium Health CHWs to teach QPR: "Question, Persuade, and Refer"
- Serve ~900 9th grade students at 3 CMS sites per year at full implementation

Progress:

- ✓ 2 new community partners added to program
- ✓ 558 participants trained
- ✓ 7 instructors trained

Executive Summary

Performance Indicators Years 1 – 3



PROGRAMS

6

All six Meaningful Medicine program areas achieved Year 2 target implementation goals with 3 programs exceeding targets



SITES

149

Program services operationalized at 149 sites of care through place-based care models

School-Based Virtual Care: 113
School-Based Virtual Therapy: 31
Community Virtual Primary Care: 5



COMMUNITY MEMBERS SERVED

21,005

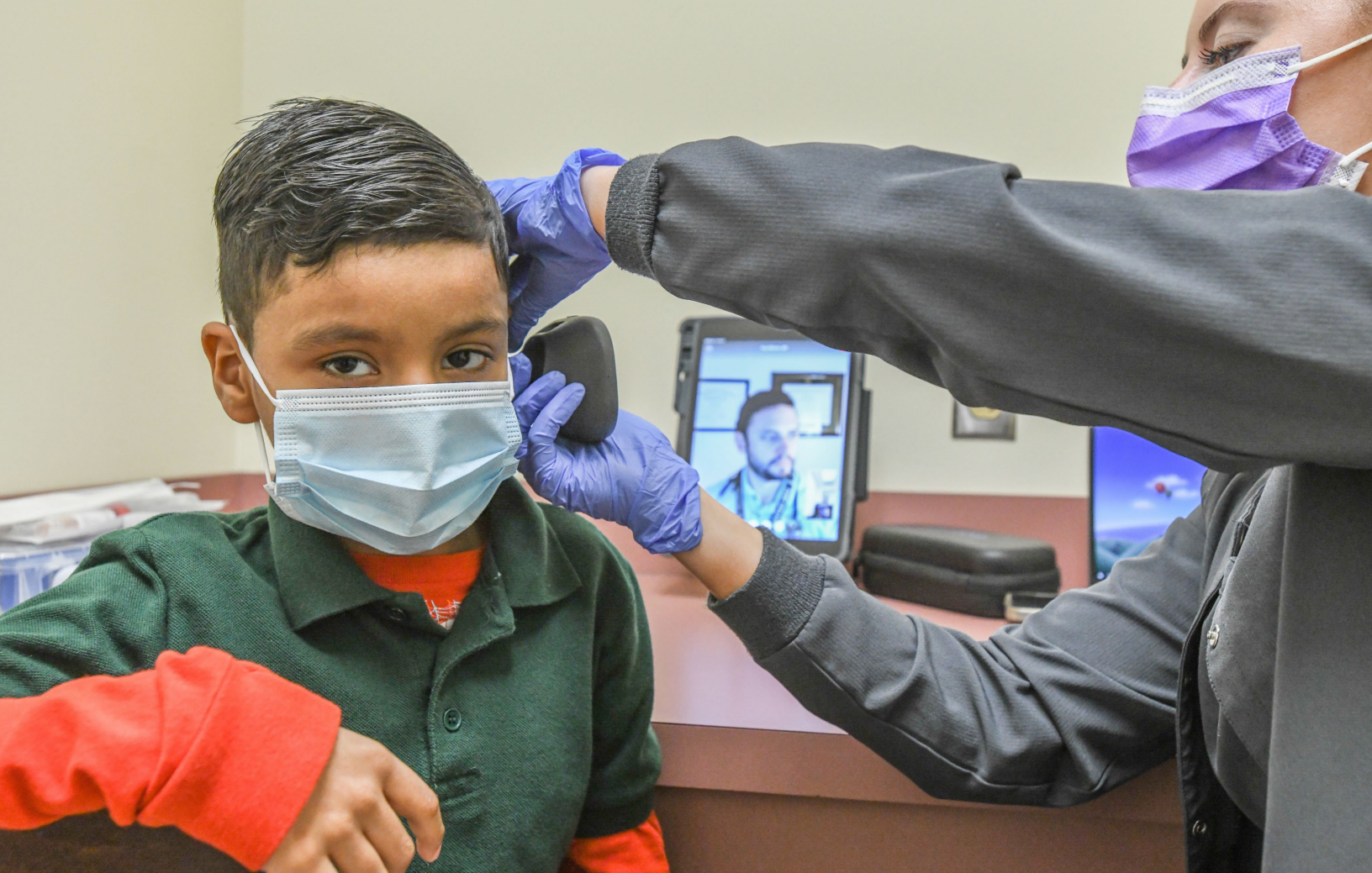
Community Virtual Primary Care: 709
School-Based Virtual Therapy: 900
Social Health: 7,861
Question, Persuade, and Refer: 558
School-Based Virtual Care: 10,698
Workforce Development: 279



T1 SCHOOLS

79

Across all 125 school sites, 79 schools, or 63% of our Meaningful Medicine school sites, were Title I (T1) schools.



School-Based Virtual Medical Care

Program Goal:

Facilitating Meaningful Access, the School-Based Virtual Medical Care (SBVC) program aims to provide critical virtual care services to students and staff in 50 high-priority CMS schools by Year 5.

School-Based Virtual Care



PROGRAM HIGHLIGHTS



113

Total Schools



10,698

Total Patients
Served



13,614

Total Visits

Program Summary

In today's era of significant advancements in virtual healthcare, the school-based virtual medical care program employs innovative technology to improve access to medical services. This telemedicine initiative, developed in partnership with Atrium Health Levine Children's, connects pediatricians to CMS students through a secure telemedicine platform. With the assistance of a trained medical assistant or telepresenter on-site, an off-site provider conducts thorough examinations using state-of-the-art virtual tools, such as a tele-otoscope for ear inspections. This approach provides a comprehensive evaluation quickly and conveniently within the school setting, enabling students who are not contagious to return to class promptly, reducing disruptions to parents' work schedules and preserving the normal flow of daily life. The program actively involves parents in conversations about diagnoses, treatment options, prescriptions, and follow-up care. Additionally, it plays a crucial role in supporting students without primary care providers by facilitating referrals to medical homes for ongoing preventive and follow-up services when needed.

School - Based Virtual Care | Program Utilization and Reach

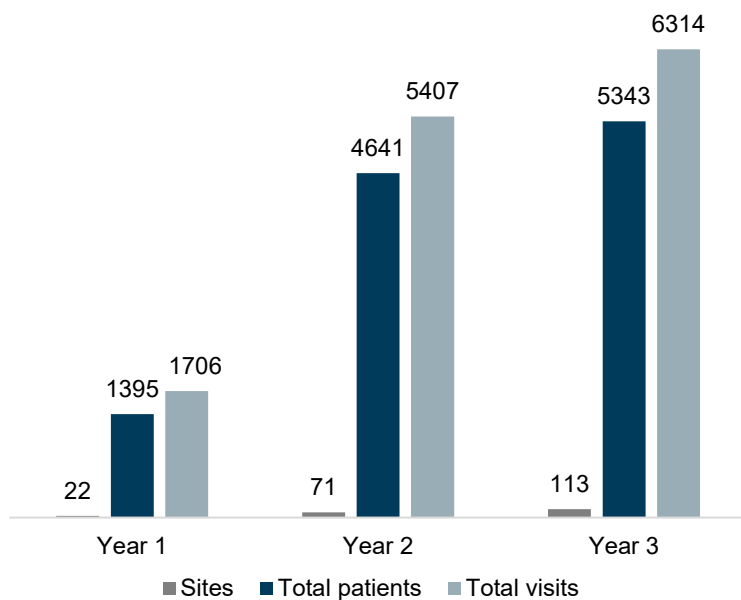
In Year 3, the school-based virtual medical care program continued to grow. With an increase of 17% in visit volume from last year, and a total count of 6,314 visits, the program demonstrated a strong commitment to bringing healthcare access to CMS students and adults. Across all program years, we achieved an **13% penetration rate**, meaning we served 13% of students enrolled in the **113 participating schools**.

Meeting Partner Requests for Health Assessments

In response to additional support needs identified by our CMS partners, the virtual care team offered free in-person state required health assessments. In Year 3, **665** virtual health assessments were provided to students.



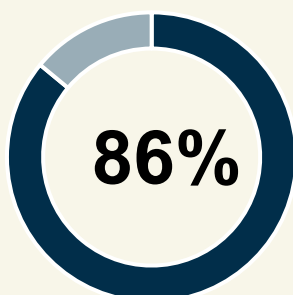
Program Utilization and Growth



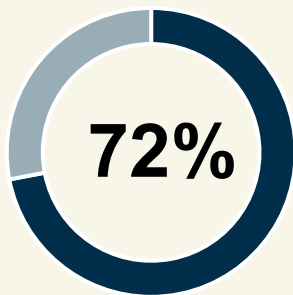
Top Five Primary Diagnoses

Sore Throat	43%
Upper Respiratory Infection	20%
Cold/Cough/Flu	13%
School Health Exam	12%
Eye Problems	12%

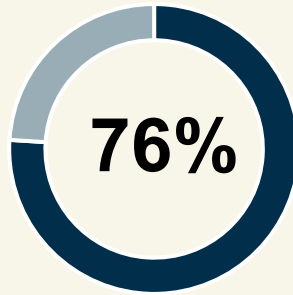
PATIENT DEMOGRAPHICS



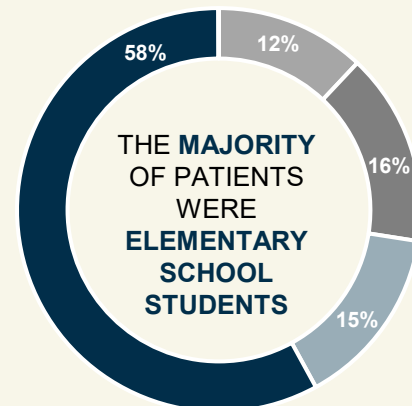
Were students



Faced financial barriers

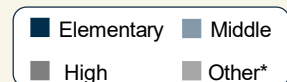


Were from historically underserved communities



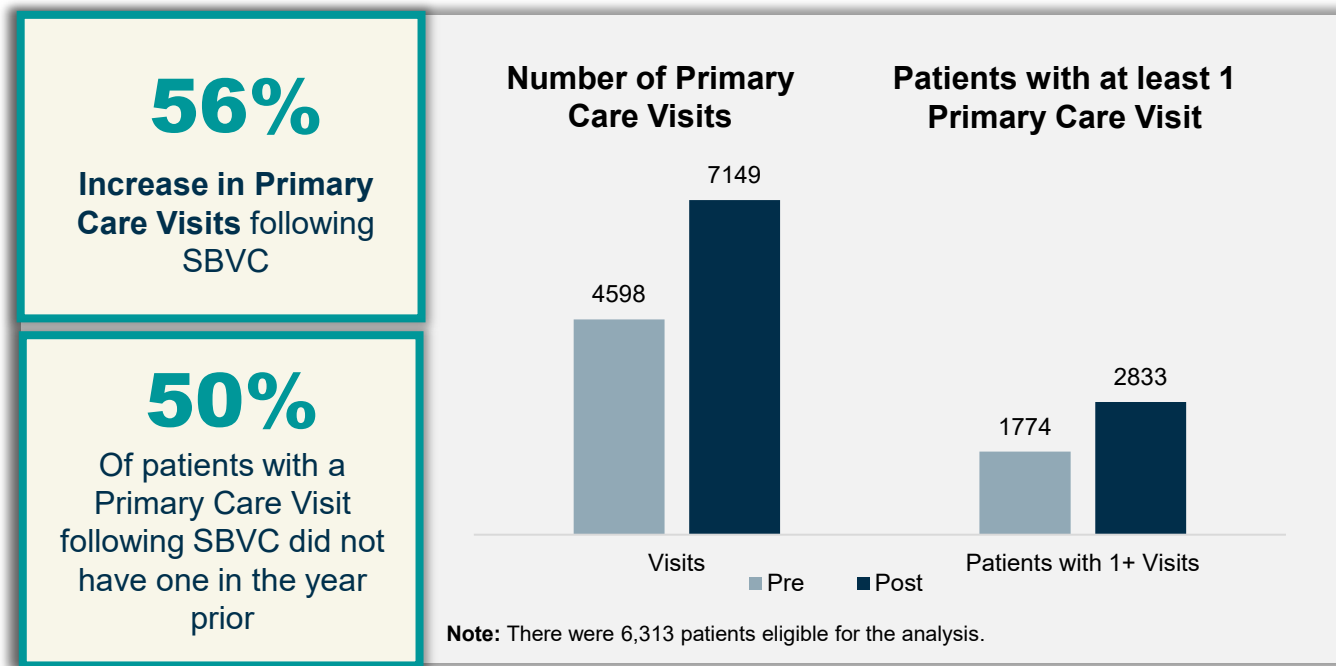
THE MAJORITY OF PATIENTS WERE ELEMENTARY SCHOOL STUDENTS

*Other category includes schools that span school levels (e.g., K-8 or grades 6-12) and sites like CMS International Center.



Primary Care Utilization Increased

One of the main goals of virtual care is to connect patients with appropriate and accessible healthcare. Following a virtual care appointment, the telepresenter may refer the patient to their existing primary care provider (PCP) when applicable or assist in connecting the patient to a PCP if needed. This referral process ensures that patients have a reliable and established point of care. Data indicate there was a 56% increase in the number of patients accessing a PCP in the 12 months following virtual care utilization compared to the 12 months prior. Moreover, **of patients with a PCP visit in the year following their virtual care visit, 50% had no PCP visit in the year prior**. These findings suggest that the Meaningful Medicine virtual care program effectively facilitates connections to accessible and appropriate healthcare following virtual visits, including for patients with no prior PCP.



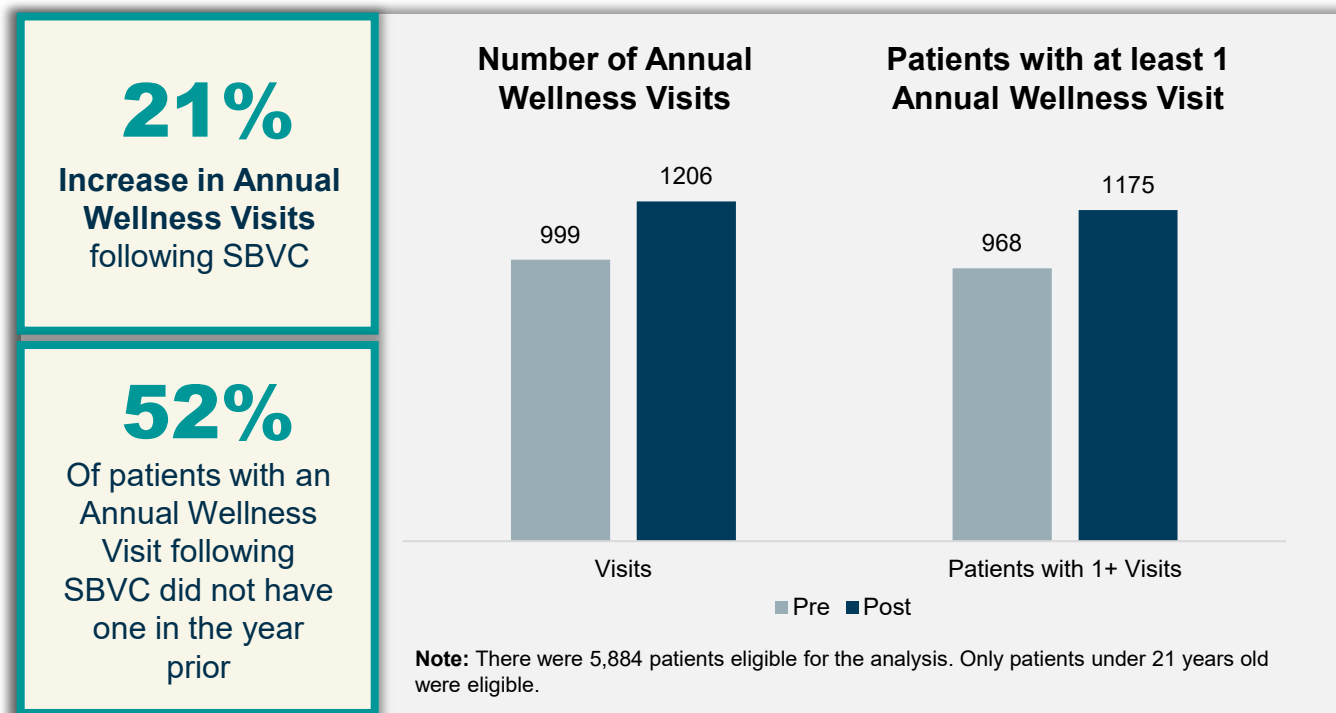
Primary Care Utilization by Race/Ethnicity

The overall increase in primary care utilization was driven by increases in primary care use for **Hispanic/Latino patients, who had an 83% increase in primary care utilization**. Providing virtual care in schools builds trusting relationships between patients, their families, and the healthcare system, increasing care access and utilization.

	% Change	Pre	Post
Black/African American	46%	758	1108
Hispanic/Latino	83%	562	1030
Patients with 'Other' Race/Ethnicity	55%	164	254
White	52%	290	441

Annual Wellness Visits Increased

Whereas primary care provider (PCP) visits shown on the prior page reflect patients who have received a wide variety of care (including sick visits, follow-up visits, and new patient visits), Annual Wellness Visits (AWV) focus specifically on important preventive care services such as immunizations, developmental and behavioral assessments, and health screenings for vision and hearing. For children and adolescents, annual wellness visits are particularly important for ensuring healthy development. Data indicate there was an increase in the number of patients under 21 who had an annual wellness visit in the 12 months following virtual care utilization compared to the 12 months prior. **Furthermore, 52% of patients who had an AWV in the year following their virtual care visit, had not had an AWV in the year prior.** These findings suggest that the Meaningful Medicine virtual care program effectively facilitates connections to primary care, ensuring patients are receiving appropriate, preventive care services.



Annual Wellness Visits by Race/Ethnicity

The overall increase in annual wellness visits was driven by increases in wellness visits for **White patients**, who **had a 44% increase** in annual wellness visits.

	% Change	Pre	Post
Black/African American	↑ 10%	400	439
Hispanic/Latino	↑ 34%	381	511
Patients with 'Other' Race/Ethnicity	↑ 2%	105	107
White	↑ 44%	82	118

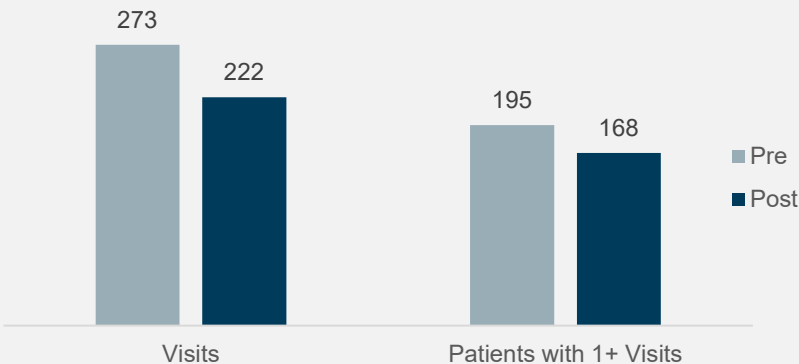
Annual Wellness Visit Following Virtual Care Drives Decrease in Avoidable and Unavoidable ED Utilization

The school-based virtual care program aims to reduce inappropriate utilization of the Emergency Department (ED) by addressing patients' non-emergent conditions during virtual care visits and facilitating connections to PCPs for ongoing healthcare access. Data from the first three years of the Meaningful Medicine program indicate that patients using virtual care who **had an Annual Wellness Visit (AWV) in the 12 months following their virtual care visit** had a **19% reduction in avoidable ED utilization** and a **4% reduction in unavoidable ED visits**. These results suggest the program is particularly effective at reducing avoidable ED utilization specifically for patients connected to preventive care following their virtual care visit.

19%

Reduction in avoidable ED visits following SBVC visit for patients who also had an Annual Wellness Visit following their SBVC appointment

Avoidable ED Utilization Following SBVC Visit



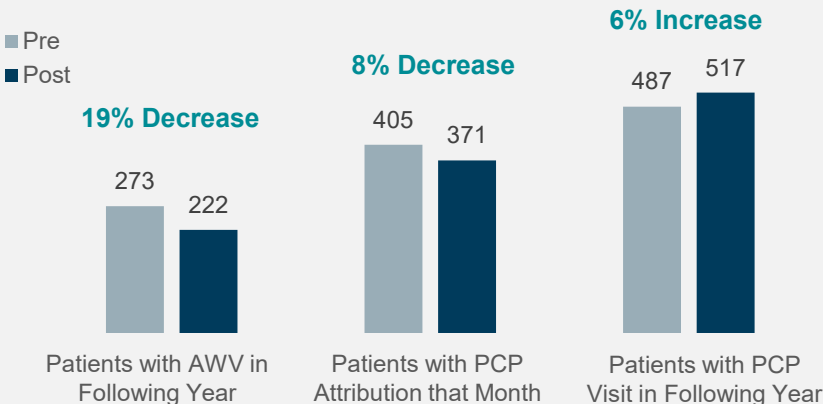
Note: There were 989 patients eligible for the analysis.

The Type of Preventive Care Matters for Decreasing Avoidable ED Utilization

Primary Care Provider (PCP) visits, PCP attribution, and AWVs are different types of overlapping preventive care. PCP visits reflect patients who have a wide variety of care (including sick visits, follow-up visits, and new patient visits), while PCP attribution reflects patients who saw a PCP for a preventive care or sick visit. AWVs are specifically preventive care visits. **Patients with an AWV in the year following their virtual care visit had the largest decrease in avoidable ED visits**, suggesting that preventive care visits are particularly important for reducing avoidable ED utilization.

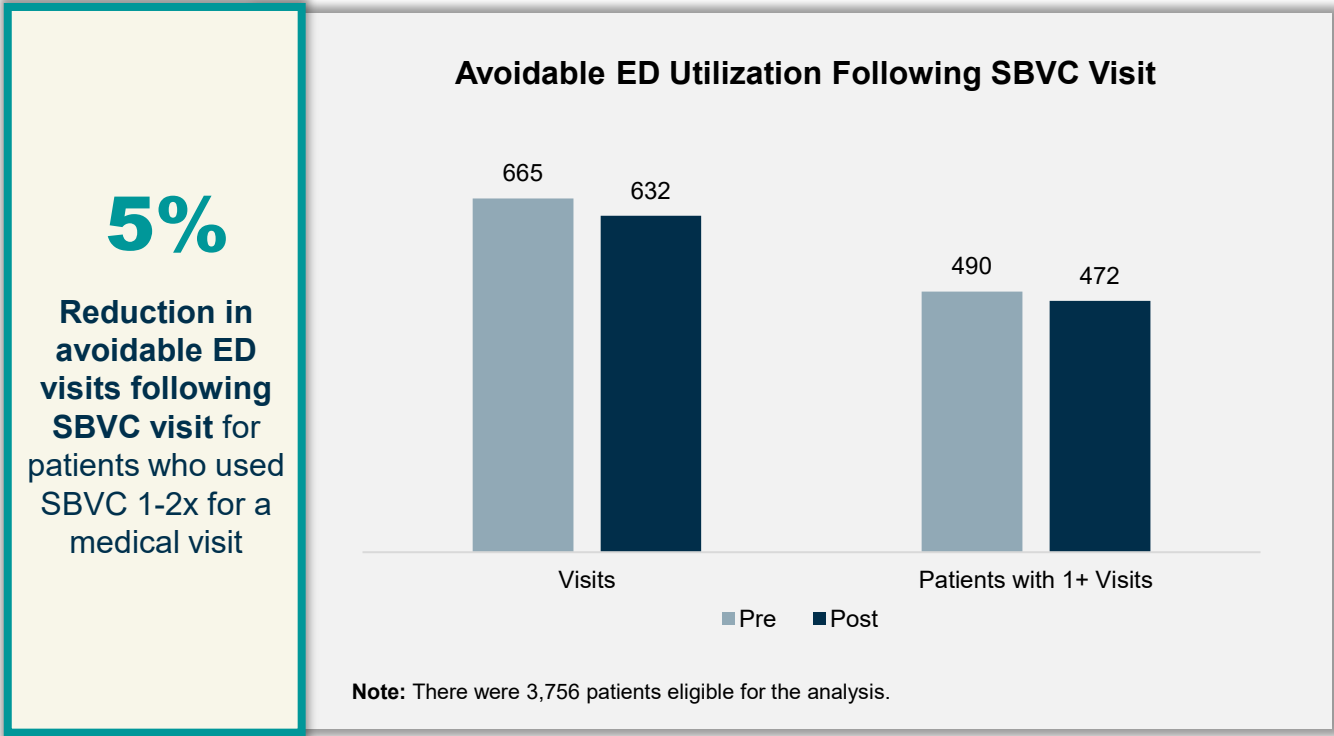
Avoidable ED Utilization Decreased the Most for Patients with Annual Wellness Visit in the Year following their SBVC Appointment

Change in Avoidable ED Utilization Following SBVC Visit



Patients who use Virtual Care See Reduced Avoidable Emergency Department Utilization

Beyond connecting patients to preventive care to reduce Emergency Department (ED) utilization, virtual care may also impact ED utilization directly. There was a **5% reduction in avoidable ED utilization** following the virtual care visit for patients with 1-2 virtual care visits. These results suggest the program is effective at reducing avoidable ED utilization specifically for patients who use virtual care at the repeated frequency.



Avoidable Emergency Department Utilization by Race/Ethnicity

The overall decrease in avoidable ED utilization was driven by reductions for **Black/African American patients** and **Hispanic/Latino patients**, who had a **9% and 10% reduction** in avoidable ED utilization, respectively.

	% Change	Pre	Post
Black/African American	9%	311	283
Hispanic/Latino	10%	279	251
Patients with 'Other' Race/Ethnicity	44%	43	62
White	13%	32	36

Patients Return To Class

Virtual care, provided in the school for students and staff, can have a direct impact on absenteeism and missed instructional time, particularly in cases where the patient would have otherwise been dismissed from school or sent home. Across students and staff, in Year 3 our patients had a 67% return to class rate, meaning that almost 7 out of 10 times, the patient was returning to class or work following a virtual care visit. For students, this means reduced class time. For staff, this means fewer days of school missed. For the district, this translates into reduced absenteeism rates and fewer times a substitute is needed for staff absences.

Instructional Time Saved

Patients who are not contagious are able to return to class rather than leaving school to see a physician outside of the school building. Similarly, staff who are not contagious are able to return to work with any necessary medications ready for pick-up at their local pharmacy. Across all patients who returned to class or work in Year 3, a total of 2,339 days of class time were saved. On average, patients save 2.5 hours of class time by using school-based virtual care.



67% Of visits resulted in patients returning to class or work

Resulting in

2.6 hours

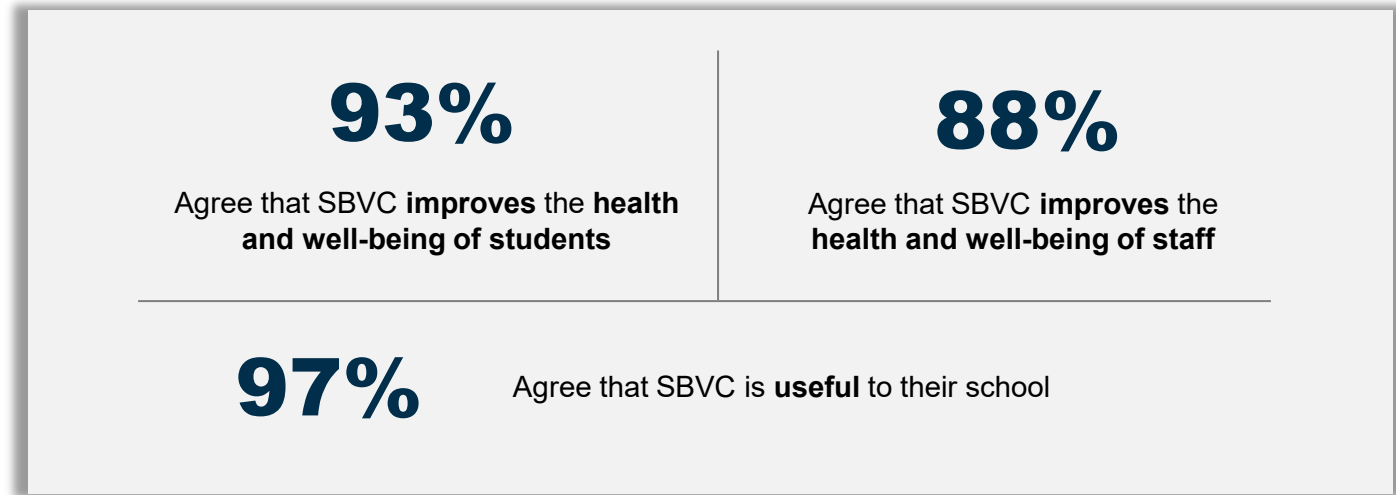
Of class time saved on average for all SBVC patients

2,300+ days

Of class time saved across all SBVC patients

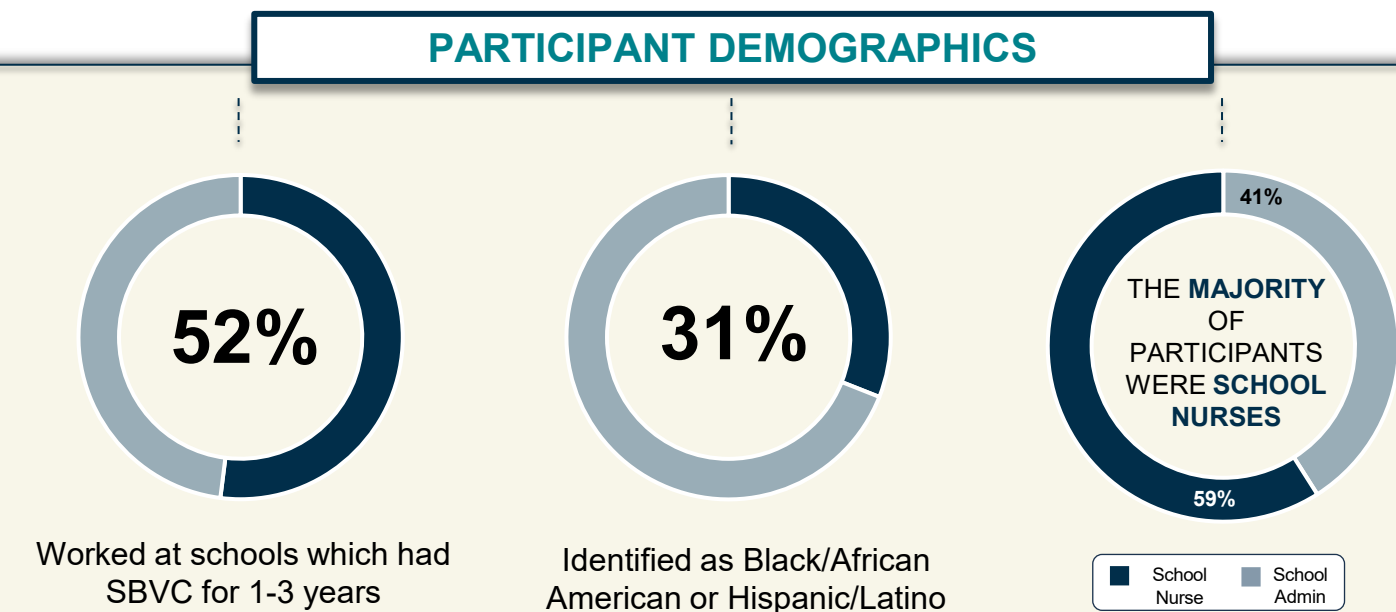
2025 Implementation Survey

In spring 2025, school nurses and administrators at Meaningful Medicine virtual care schools completed an Implementation Survey to assess factors related to utilization and reach of the program. Across the 113 schools, over 90 participants completed the survey, representing more than 60 Meaningful Medicine schools. Overwhelmingly, school staff expressed **positive impacts of virtual care** including **keeping kids in school**, allowing staff to stay at work, and **increasing access to care**.



Responding to Survey Feedback

Participants also provided feedback related to waiting times for telepresenters, cost of care, and interest in additional services. In response to this feedback the virtual care team is **excited to roll-out a new mobile app** and web platform designed to enhance workflow and communication between CMS and Atrium Health, funded by a grant from The Duke Endowment.



School Nurses and Administrators

“

“Students do not have to leave school early unless needed...[and] parents do not have to leave their workplace to come and get their children unless their child is considered contagious. Students can be seen regardless of whether or not they have medical insurance...[and they] can be set up with a primary care provider through Atrium Health.”

- Elementary School Nurse

“

“[SBVC] has provided more access to healthcare at a reduced cost. The wait to be seen is minimal compared to going to the ER for non-emergent issues.”

- Elementary School Administrator

“

“[This program] creates an opportunity for my students not to miss school, and the opportunity for parents not to take off extended time with scheduling appointments.”

- Middle School Nurse

Partner Voices



I feel truly honored to be part of the Meaningful Medicine program, partnering with Atrium Health Levine Children's School-Based Virtual Care to serve Charlotte-Mecklenburg Schools over the past three years. Through this collaboration, we're now providing care in 100+ CMS schools—bringing high-quality medical services directly to students, faculty, and staff. Using remote examination tools and point-of-care testing supported by our dedicated team, we're able to meet health needs right where they arise—inside the school community. By removing barriers to healthcare access through this innovative model, we're helping keep classrooms healthy, engaged, and thriving. I truly believe our community partnerships are the cornerstone of well-being, and I'm proud to be part of a team that is committed to serving everyone—in the right place, at the right time.

– **Patsy Fisher**, Senior Ambulatory Manager,
Levine Children's Hospital, Atrium Health



The School-Based Virtual Clinic, established through CMS' partnership with Meaningful Medicine, has significantly enhanced the support we provide to students and families. By addressing health needs in real time, the program ensures that students remain in school, maintain academic focus, and experience fewer interruptions to learning. Expanded services—including access to medical care, immunizations, health assessments, and family resources—have reduced barriers to timely care and reinforced our commitment to the whole child. Early outcomes show improved student attendance, fewer unnecessary emergency room visits, and increased instructional time. Beyond these immediate benefits, the initiative is creating a sustainable framework that will continue to strengthen student health and academic achievement across our district well into the future.

– **Treva Johnson**, Coordinated School Health Specialist,
Charlotte-Mecklenburg Schools



School-Based Virtual Therapy

Program Goal:

Facilitating Meaningful Access, the School-Based Virtual Therapy program aims to provide mental health care services to students at 31 high-need CMS schools by Year 5.

School-Based Virtual Therapy



PROGRAM HIGHLIGHTS



31

Total Schools



900

Total Patients
Served



11,632

Total Visits

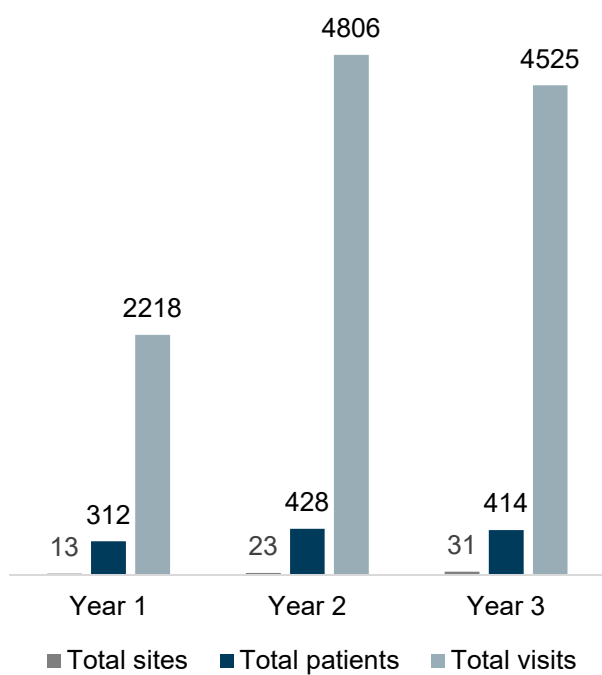
Program Summary

Recent advancements in virtual therapy have enabled a visionary collaboration between CMS and Atrium Health, introducing an innovative school-based virtual therapy program. Through this partnership, Atrium Health mental health clinicians deliver onsite support to CMS middle and high school students via a secure, live streaming video platform. When a mental health need is identified by school staff or a parent/guardian, an initial teletherapy intake is scheduled. This process includes the development of a treatment plan in coordination with the parent/guardian and relevant school representatives. The model ensures that students receive convenient, high-quality teletherapy services aligned with their treatment plans, all within the school setting. Students participate in weekly sessions through secure video conferencing or, if necessary, by phone. This virtual therapy approach delivers effective mental health care while minimizing disruption to class time and expanding access for students requiring support.

School - Based Virtual Therapy | Program Utilization and Reach

In year 3, the school-based virtual therapy program continued to expand to meet students' needs. With **an increase of 105% in visit volume** compared to year 1, and a **total count of 4,525 visits in year 3**, the program demonstrated a strong commitment to bringing therapy access to CMS students. Patients were seen primarily for anxiety and depression, as well as attention-deficit/hyperactivity disorder, adjustment disorder, and post-traumatic stress disorder.

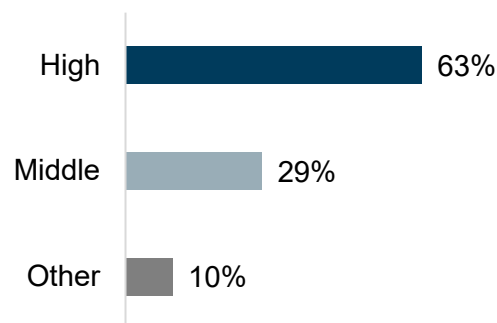
Program Utilization and Growth



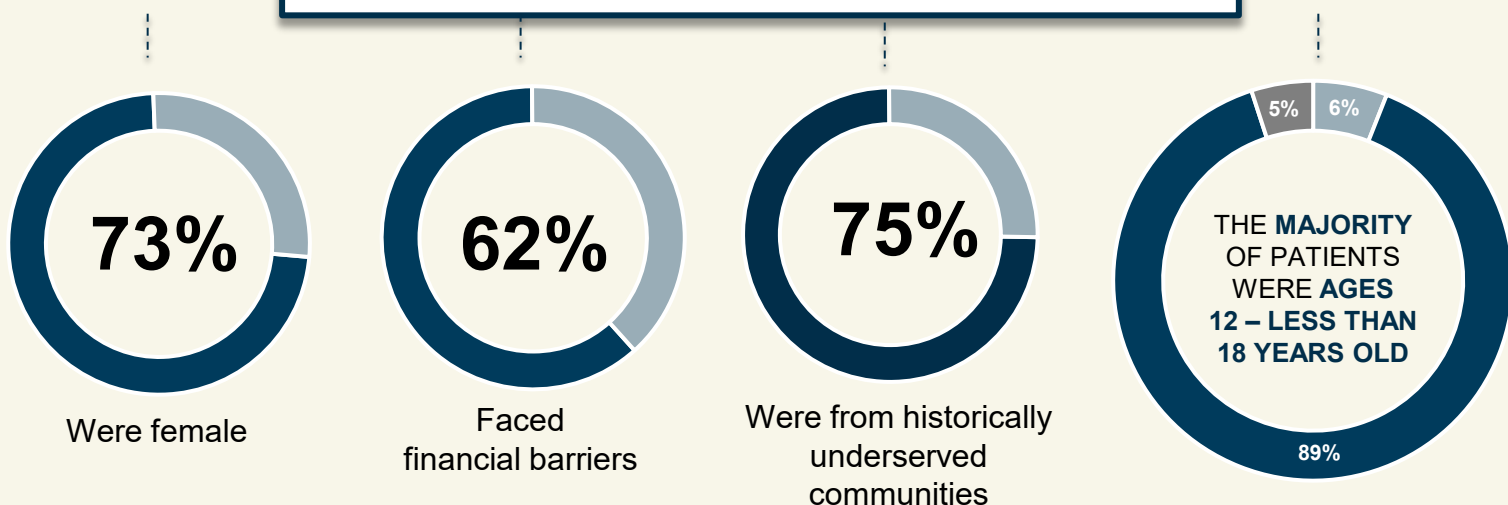
Top Five Primary Diagnoses

Anxiety	41%
Depression	30%
Attention deficit/hyperactivity disorder	11%
Adjustment disorder	10%
Post-traumatic stress disorder	8%

Patient Volume by School Level



PATIENT DEMOGRAPHICS



Note: Students in K-4 are not eligible for teletherapy services. The other category includes schools that span school levels (e.g., K-8 or grades 6-12).

■ <12 ■ 12 - <18 ■ 18+

Referral Utilization Rate

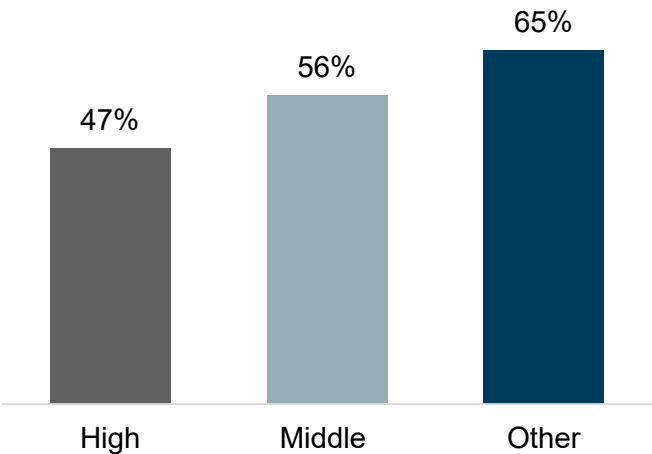
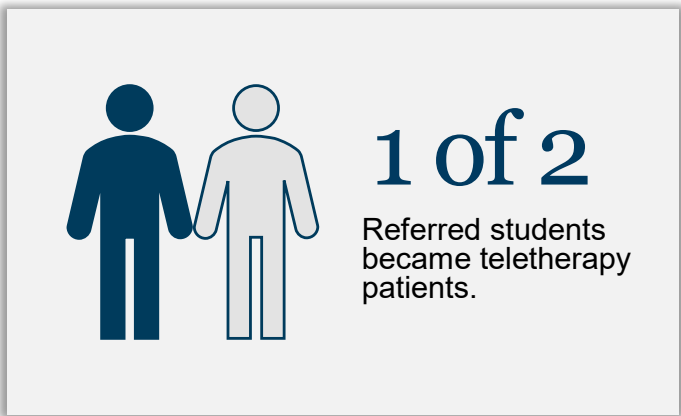
While patient and visit volume demonstrate one aspect of program utilization, referral to intake rate and referral utilization rates provide another way to understand the mental health needs of the student body. Referrals are the first step in the process, and occur when a school staff member, the student themselves, or someone else, refer the student to the teletherapy program. Following a referral, the student or the students’ guardians may decline to consent to services, or the therapist may be unable to reach the guardian after 3 attempts. All of these outcomes would result in the student not becoming a patient, even though there was an identified need. Looking specifically at referral volume, in year 3 across all schools the Meaningful Medicine teletherapy program achieved a 1.6% referral utilization rate and converted 50% of referrals into new patients.

Referral to Intake Rate

In year 3, schools offering teletherapy achieved an average referral to patient rate of 50%. For every 10 patients who were referred to therapy, there were 5 new patients who engaged in at least 1 therapy appointment.

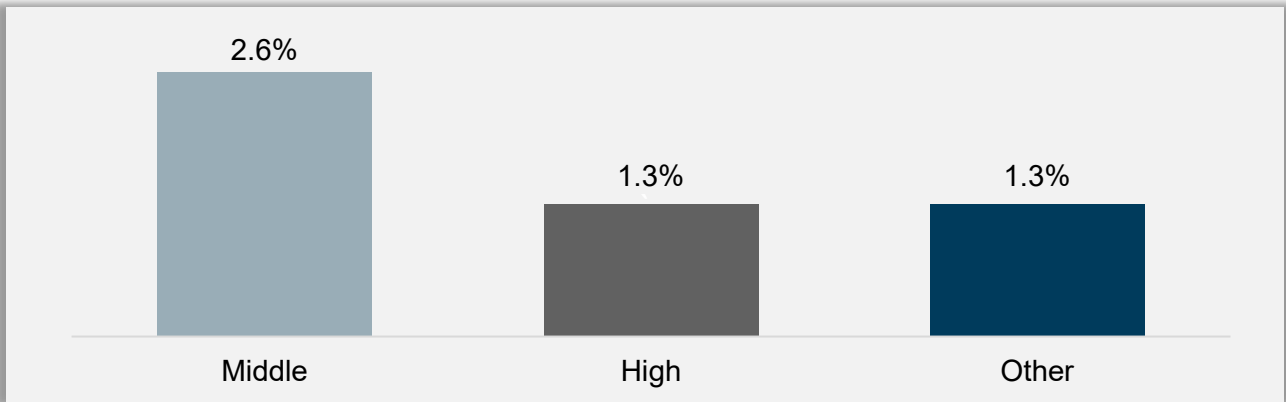
Referral to Intake Rate by School Level

Referral to intake rate is the percent of referred students who become patients.



Referral Utilization Rate

In year 3, the **average utilization rate was 1.6%**, meaning that across the 31 teletherapy schools, 1.6% of students were referred to teletherapy services. This was driven by middle school utilization, where over 2.5% of enrolled students were referred to School-Based Virtual Therapy.



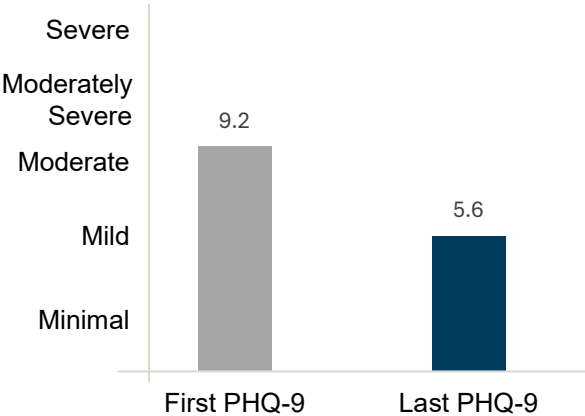
Notes:

- Students in K-4 are not eligible for teletherapy services currently.
- The “other school” category includes schools that span school levels (e.g., K-8 or grades 6-12).

Anxiety and Depression Decreased for Patients Using Virtual Therapy

The PHQ-9 (Patient Health Questionnaire 9) and GAD-7 (Generalized Anxiety Disorder 7) are widely utilized tools to screen, diagnose, monitor, and measure the severity of depression and anxiety, respectively. In the Meaningful Medicine program, these questionnaires were used to evaluate patients' levels of depression and anxiety. Data analysis from the three program years indicates significant improvement, suggesting that the school-based teletherapy program is effective at delivering the care patients need in an accessible, virtual environment.

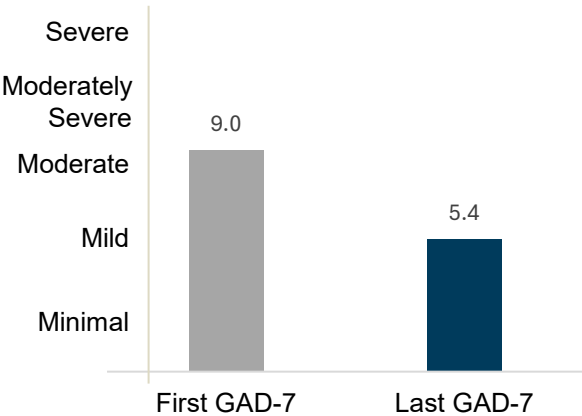
44% Of patients achieved a 50% reduction in their PHQ-9 score



PHQ-9 scores were significantly reduced by 3.7 points ($p < .001$) on average.

On average, patients' depressive symptoms improved.

40% Of patients achieved a 50% reduction in their GAD-7 score



GAD-7 scores were significantly reduced by 3.6 points ($p < .001$) on average.

On average, patients' anxiety symptoms improved.

- Notes:
- A lower score on the PHQ-9 and GAD-7 is associated with reduced depression and anxiety symptoms, respectively.
 - 303 (34%) of the 900 unique patients served across Meaningful Medicine years 1 – 3 were eligible for PHQ-9 before/after analysis; 310 (34%) of the 900 unique patients served across Meaningful Medicine years 1 – 3 were eligible for GAD-7 before/after analysis.
 - Change in average scores adjusted for payor, sex, race/ethnicity, and school level.

Program Evolves to Provide Telepsychiatry through Collaboration

In the second year of the Meaningful Medicine program, Atrium Health’s Behavioral Health team launched a **School-Based TelePsychiatry Pilot** program. This initiative offers an additional layer of support for students requiring psychiatric evaluation and enables them to virtually consult with a psychiatrist when recommended by their therapist. With this program, if medications are necessary for the student’s treatment, prescriptions are transmitted directly to the student’s pharmacy, facilitating virtual psychiatric care within the school environment, and reducing the student’s time out of school.

By the third year of the Meaningful Medicine program, expanded services are now available across all 32 participating schools, further strengthening the program’s reach and impact. Pre-visit coordination, led by telepresenters from the school-based virtual care team, continues to demonstrate the value of cross-collaboration between medical and mental health care teams. Building on this framework, the virtual psychiatry component has grown to serve 53 total schools across 7 counties.

Telepsychiatry by the Numbers	
Total unique intakes scheduled	20
Total appointments scheduled	100
Total unique patients	21
Total visits	71
Total schools using telepsychiatry	12



Integrating psychiatric services within schools exemplifies Meaningful Medicine in action - meeting students where they are and helping them find confidence and the capacity to thrive both in and beyond the classroom. By embedding care into schools, we can decrease the barriers of transportation, access, and mental health stigma. This model of care fosters collaboration amongst educators, clinicians, and families. The result is a healthier student body where emotional well-being and academic achievement can grow together.

- Dr. Jenna Steele, D.O.
Atrium Health Behavioral Health

Partner Voices



Over the past three years, I've had the pleasure not only to witness the growth of this program, but also to be an active participant in its development. Every day, I have the opportunity to speak with parents, staff, students, and teammates who express their deep gratitude for a program that truly meets them where they are. The Meaningful Medicine program empowers students and their families to actively engage in therapy without added inconvenience, creating space for real growth and healing beyond their current circumstances. School based therapy was created to support and reach individuals in every community and that is exactly what it is doing!

– **Ashley Wright**, Manager, School Based Services Behavioral Health, Atrium Health



The Meaningful Medicine partnership has been transformative for our students at Hawthorne Academy. As a school social worker, I've witnessed remarkable changes since implementing virtual therapy services. Students who have previously struggled with anxiety or family-related concerns are now developing foundational coping skills and self-regulation strategies through the program. We've seen significant improvements in attendance because students no longer need to leave school early for off-site mental health appointments. This consistency has directly translated into better academic performance. What excites me most is the equity this program provides every student who needs mental health support now has accessible, timely services regardless of transportation barriers or family schedules. This innovative approach ensures that mental wellness and academic success go hand in hand for all our students.

– **Tavia Tubbs**, Social School Worker, Hawthorne Academy of Health Science, Charlotte-Mecklenburg Schools



Community Virtual Primary Care

Program Goal:

Creating Meaningful Access points, the Community Virtual Primary Care (CVPC) program aims to offer virtual medical care to vulnerable populations at 3 community sites by Year 5.

Community Virtual Primary Care



PROGRAM HIGHLIGHTS



5

Community
Sites



709

Total Patients
Served



757

Total Visits

Program Summary

Meaningful Medicine has introduced a modern approach to community care, in which experienced primary care physicians from Atrium Health clinics deliver accessible, high-quality medical services by engaging with individuals in everyday settings such as churches and gyms. This virtual primary care program serves patients across all age groups and backgrounds within the community.

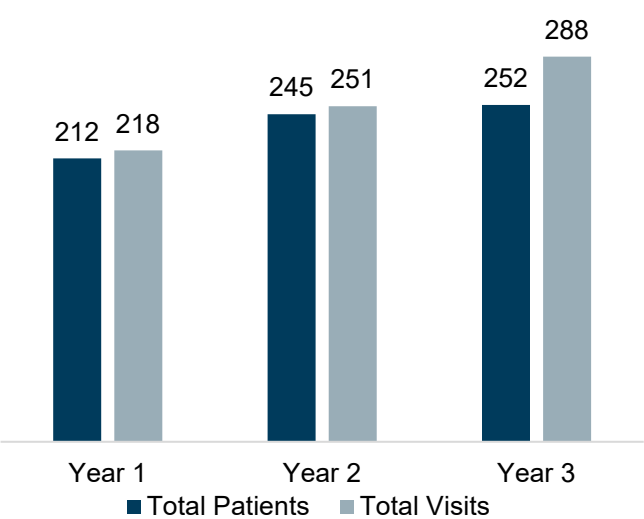
Through the support of trained telepresenters, enhanced video consultations offer prompt medical attention for minor health concerns in familiar local environments. Physicians, equipped with secure telemedicine platforms and advanced diagnostic tools, are able to perform comprehensive health assessments remotely.

On-site testing for conditions such as influenza, COVID-19, and urinary infections is available to improve patient convenience. After evaluation, patients are provided with an inclusive treatment plan, complete with prescription management and follow-up care coordination. Patients are connected to local healthcare providers according to their preferences, regardless of whether they currently have a designated medical home or are seeking one.

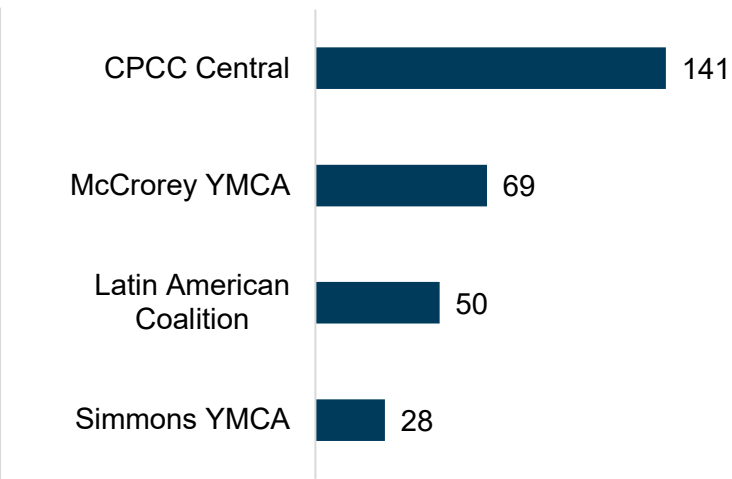
Community Virtual Primary Care | Program Utilization and Reach

In Year 3, across all 5 sites the Community Virtual Primary Care program served 252 patients through 288 visits, an increase of **15%** in visit volume from Year 2 to Year 3. The program demonstrated a strong commitment to bringing access to medical care to all community members in their daily rhythms of life.

Program Utilization and Growth

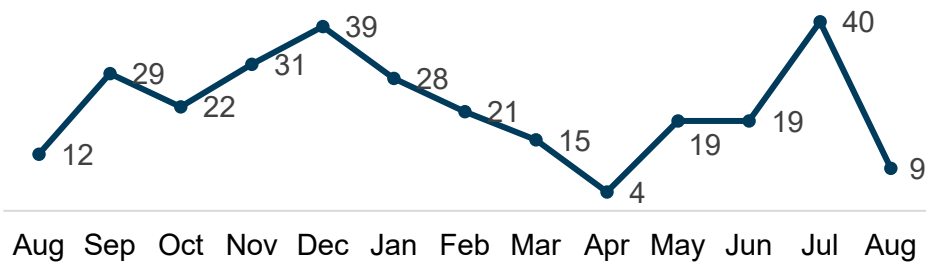


Utilization by Location – Year 3

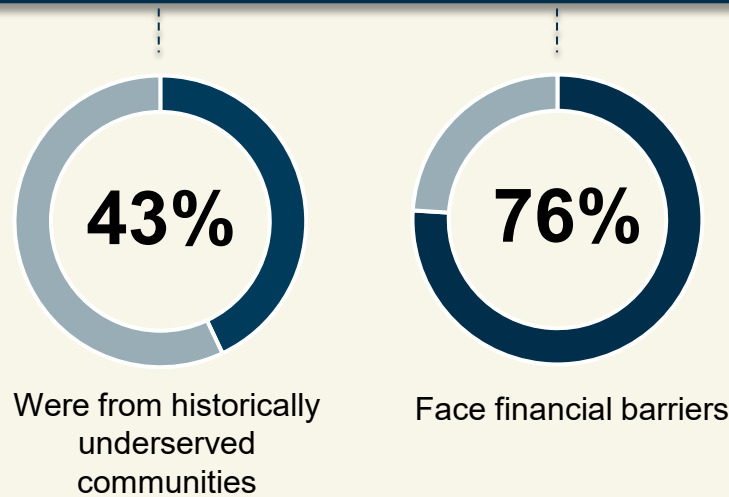


Visit Volume in Year 3

Visit volume peaked in December 2024 and July 2025. These peaks are likely due to the cold/cough/flu season in the winter, and the sports physicals and health assessments that occur at the YMCA sites in the summer.



PATIENT DEMOGRAPHICS



Top Five Primary Diagnoses

School Health Exam	54%
Pharyngitis	18%
Cold/Cough/Flu	13%
Sinusitis	9%
Upper Respiratory Infection	6%

Innovating and Responding to Community Need for Sports Physicals and Health Assessments

For the third consecutive year, the program has effectively responded to the increasing demand for on-site sports physicals for the students at the **Simmons** and **McCrorey YMCAs**.

72

On-site Sports Physicals completed at YMCA sites



106

Student Health Assessments completed at CPCC



Additionally, through the **Central Piedmont Community College (CPCC)** partnership, students can continue to access physical exams on campus at the Leon Levine Health Sciences Center via the Meaningful Medicine community virtual clinic for a fee of only \$49.

This program provides an affordable and accessible healthcare option while encouraging students to connect with the community clinic and promoting a proactive approach to their health and well-being.

These achievements highlight the innovative efforts of our operational leaders and partners, demonstrating the adaptability of the Meaningful Medicine program in meeting this evolving need. Previous challenges have been transformed into opportunities, showcasing our commitment to delivering exceptional service.

Training the next generation of Telepresenters through Central Piedmont Community College (CPCC)



As part of the Meaningful Medicine program, Atrium Health's clinical leadership partnered with **CPCC** to design and implement a telemedicine training program for Medical Assistants in 2023. Since the curriculum's initial launch, a total of **97** students have successfully completed the course, including 8 students in the Fall of 2024 and 7 students in the Spring of 2025. This strategic partnership underscores Atrium Health and CPCC's shared commitment to advancing workforce development and reflects the organizations' enthusiasm for cultivating innovative, technology-enabled care delivery models.

Partner Voices



Bringing care to the community means meeting people where they are, and with Community Virtual Primary care we can open doors to health for everyone, no matter their zip code. The collaboration shared with our Meaningful Medicine partners has created so much access and fulfillment from our providers, support staff, partners and patients.

I truly appreciate the opportunity to be a part of this wonderful initiative and look forward to all the growth it will blossom.

– **Tario Burns**, Senior Operations Manager,
Virtual Primary Care, Atrium Health



At the Latin American Coalition, we believe that access to healthcare is a fundamental pillar for every family to thrive and progress. Our partnership with Meaningful Medicine has allowed us to break down barriers and provide access directly to the most vulnerable in our Latino communities. Through the Community Virtual Primary Care Clinics, families now have another option in a place where they feel welcome and safe. This collaboration not only improves health outcomes but also strengthens the bonds of trust and belonging. Together, we are building a healthier, more inclusive Charlotte—one family at a time.

– **José Hernández-Paris**, Chief Executive Officer,
Latin American Coalition



Workforce Development

Program Goal:

Expanding workforce opportunities and fostering Meaningful Access, the Workforce Development program aims to train and place 140 students over 5 years through a pipeline of the following 3 initiatives: PATCH, Internship, and Rise to Success.

Workforce Development



Rise to Success
An Outside In, Inside Up
Atrium Health Career Development Program

PROGRAM HIGHLIGHTS



132

Students enrolled
in PATCH



71

Students in
Summer Internship



76

New Students in
Rise to Success

Program Summary

Workforce Development (WFD) is a series of individual programs designed to expose students to training and opportunities to enter the healthcare or related fields. The program's overall goal is to create a pipeline for high school students and students pursuing an Associate's degree to access healthcare career opportunities and develop the next generation of healthcare workers. Within the WFD pipeline, three distinct programs have been designed to connect students to healthcare careers:

- PATCH is an 8-week curriculum of exposure to healthcare careers through professional development.
- Internship program offers a 7-week non-clinical paid experience that includes project-based learning and upskill training.
- Rise to Success is a 3-year program for students pursuing an Associate's degree in a healthcare field, that places students in paid healthcare positions relevant to their degree while providing a yearly stipend.

Each of these programs is structured to build on the next, offering targeted experiences and support to help students advance in their healthcare journey.

Program Results

After eight weeks in the PATCH program, students completed a post-program Exit Survey. Overall, the participants reported that the program components were impactful, the instructors were engaging, and their interest in pursuing a career in healthcare increased following their involvement in the program.

16%

Increased interest in a career in healthcare after PATCH

88%

Attended Title 1 schools

84%

Agree or strongly agree that after PATCH they were interested in a career in healthcare

93%

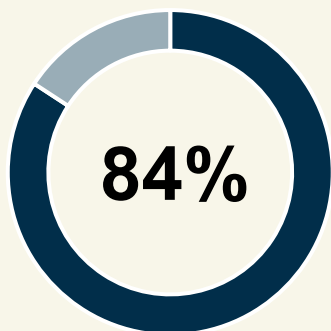
From historically underserved communities

65%

Use free or reduced-price lunch

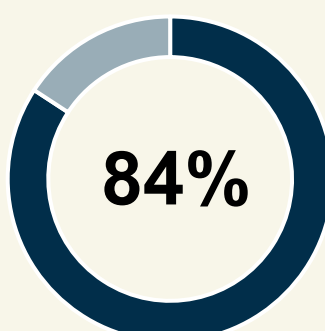
Notes: Demographic data sourced from program application (N = 40).
Interest in a healthcare career rated on a 1 (Strongly Disagree) to 5 (Strongly Agree).

ENGAGEMENT



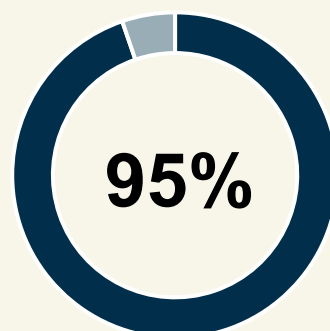
Found presenters very or extremely engaging

TRAINING RELEVANCE



Reported PATCH prepared them to reach their academic goals

SATISFACTION



Were satisfied with PATCH

Notes: Percentages reflect a response of agree or strongly agree. Results reflect survey responses (N = 19).

Program Results

After seven weeks in internship, students completed a post program survey. Overall, students reported that they gained new skills through the internship, they increased their knowledge about healthcare careers, and they plan to pursue a career in healthcare. Students reported that they learned many different things through their internship experience, which fell into four major themes.

Learning Through Doing



33%

Technical skills



43%

Healthcare-specific skills



9%

Learned more about their interests



15%

Soft skills

Demographics

54%

First generation students

81%

From historically underserved communities

62%

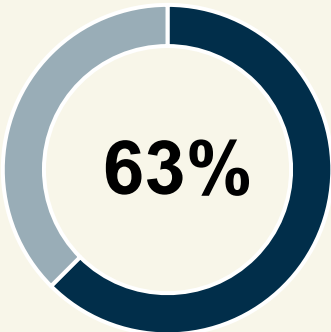
Use free or reduced-price meals

51%

Participated in PATCH prior to Internship

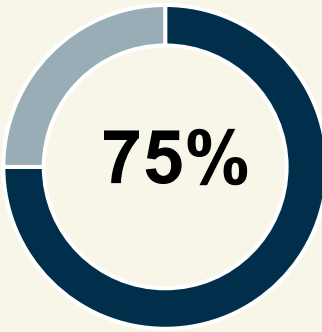
Note: Demographic data reflects internship program participants from Mecklenburg County and Meaningful Medicine participants (N = 37).

SKILLS



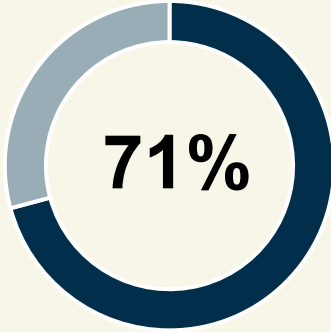
Gained a new skill

KNOWLEDGE



Increased their knowledge about healthcare careers

INTEREST



Interested in pursuing a career in healthcare

Notes: Percentages reflect a response of strongly agree. Results reflect all internship program participants who responded to the survey and include Meaningful Medicine participants (N = 48).

Program Results

Current Rise to Success students are a diverse group of students, with a majority coming from communities who are historically underrepresented in the healthcare workforce. Additionally, students in the program have utilized the workforce development pipeline to prepare for a career in healthcare, with 56% indicating that they participated in a prior workforce development program.

7

Rise to Success students graduated with their degree

Meaningful Medicine participants who completed the annual survey responded that they agree or strongly agreed that the program was important for their:



67%
Academic Goals



80%
General Well-Being



71%
Financial Stability

63%

First generation students

84%

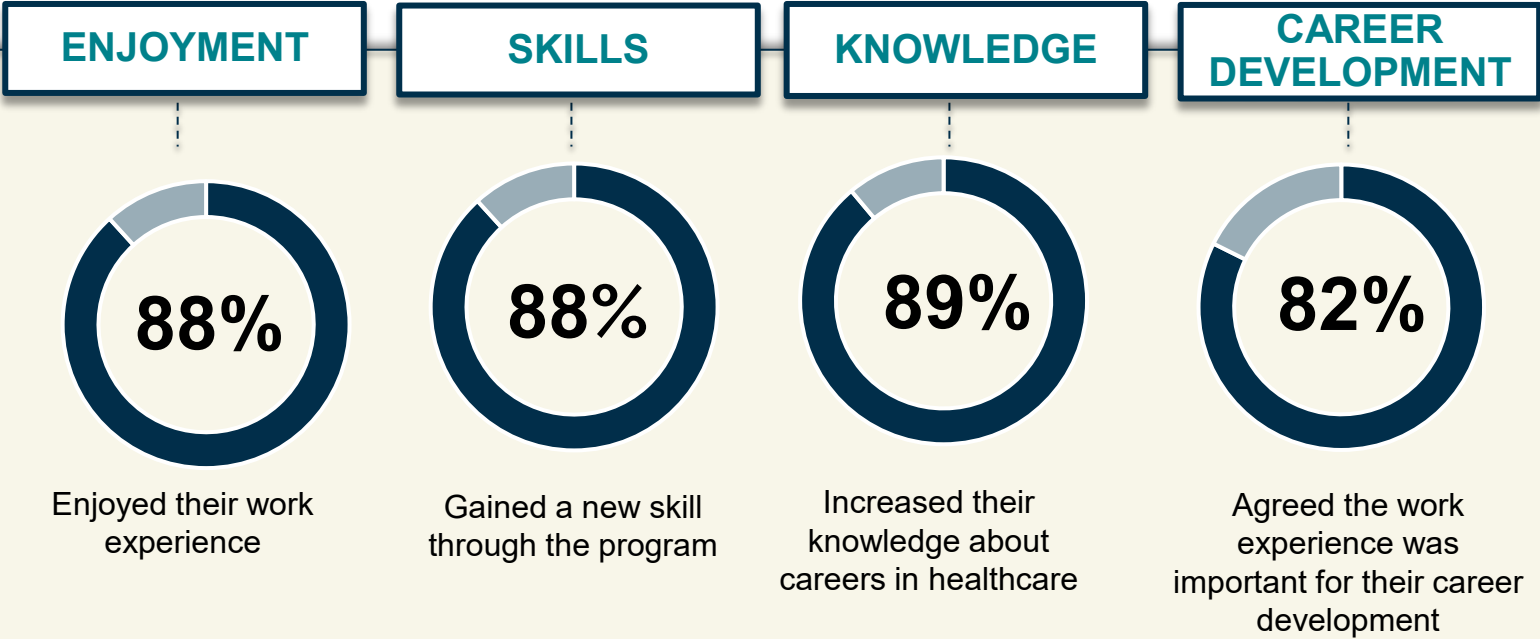
From historically underserved communities

65%

Use free or reduced-price meals

56%

Participated a previous workforce development programs



Partner Voices



Atrium Health’s Rise to Success program exemplifies our commitment to community investment and workforce sustainability. Rise to Success empowers high school graduates to pursue healthcare careers through a unique blend of education, employment, and mentorship. While earning a college degree, participants work part-time at Atrium Health, gaining clinical experience and exposure to a wide variety of career fields. Rise to Success is a catalyst for economic mobility and a sustainable career. The Meaningful Medicine Partnership plays a vital role in helping us build a stronger, more inclusive future with skilled and capable employees.

– **Lori Shafey**, Manager,
Workforce Career Innovation, Atrium Health



The PATCH Program will enter its 12th year inviting high school student from CMS Title 1 Schools to our campus to learn about health professions. PATCH Scholars work with faculty and medical students from Wake Forest University School of Medicine and other health professionals across the Atrium system engaging in hands-on interactive workshops and original scientific research about pressing medical concerns in our Charlotte communities. Preparation for higher education and mentoring are also important facets of the PATCH Program. We are committed to our mission: PATCH empowers students from low-resource communities to discover and pursue fulfilling careers in health care, thereby cultivating a workforce dedicated to optimizing health outcomes for all.

– **Iris S. Cheng, MD FACP**, Professor of Medicine,
PATCH Faculty Director, Atrium Health

Student Voices

“

I learned a lot about healthcare careers that I didn't even consider prior to the program and learned about the work/life situations of many of these careers. I loved learning about radiology which was a profession I didn't even want to consider because I thought it was boring, but I feel more propelled towards it now.

- 2025 Patch Student

“

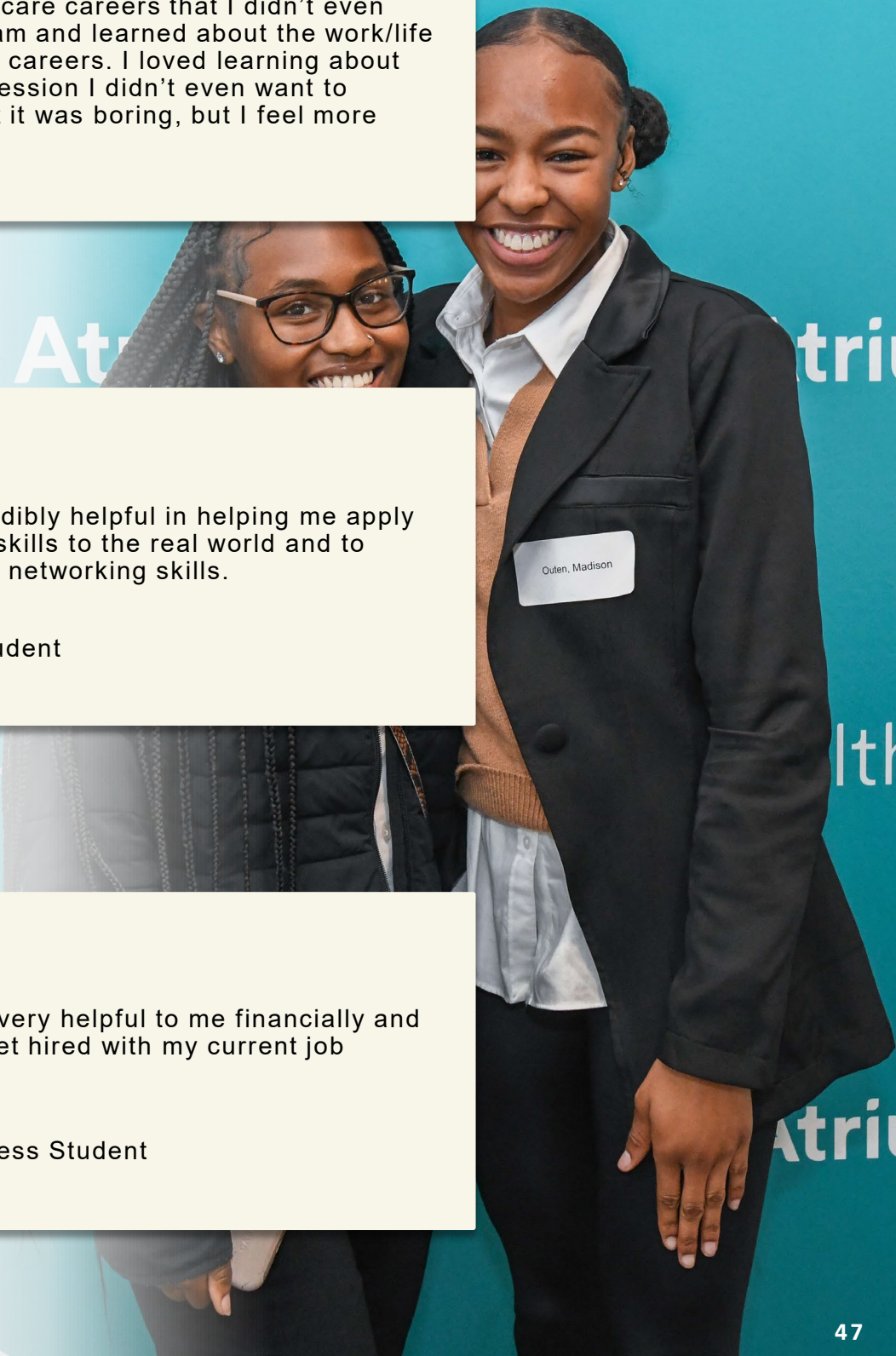
The internship was incredibly helpful in helping me apply my technical classroom skills to the real world and to practice and improve my networking skills.

- 2025 Internship Student

“

This program has been very helpful to me financially and being able to help me get hired with my current job position.

- 2025 Rise to Success Student





Social Health

Program Goal:

Cultivating Meaningful Connections, the Social Health program aims to offer resource connections and wrap around support for Social Drivers of Health needs, with the goal of integrating screening and referrals of students and community members at virtual care touch points.

Social Health



PROGRAM HIGHLIGHTS



149

Sites Served



7,861

Patients Screened



1,179

Patients SDOH
Positive

Program Summary

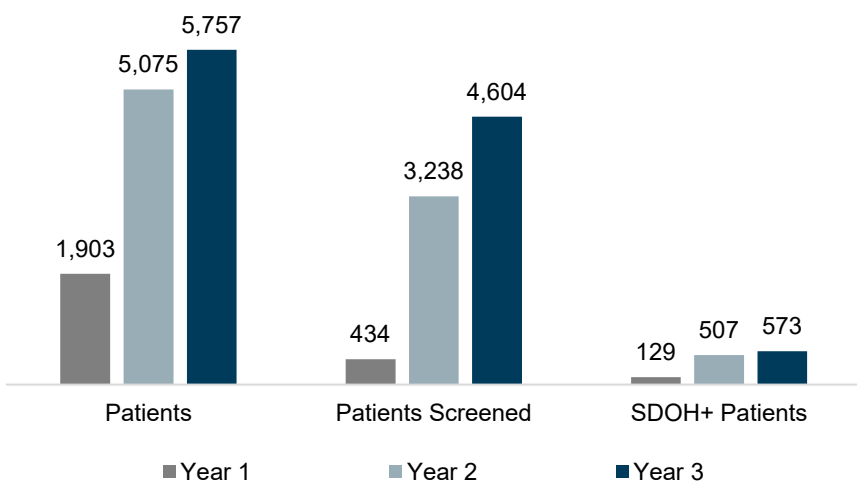
The Social Health program, a component of the Meaningful Connections initiative, seeks to address barriers to healthcare access through a strategic and comprehensive approach. It connects patients to essential resources and provides broad support focused on social drivers of health (SDOH). These drivers include the conditions that affect individuals' health, well-being, and overall quality of life, often associated with adverse outcomes such as inadequate housing, unemployment, or limited access to healthy food.

Students, school staff, and community members identified with social health needs during a Meaningful Access virtual care clinic visit are referred to Referral Navigators and/or Community Health Workers (CHWs) for ongoing support.

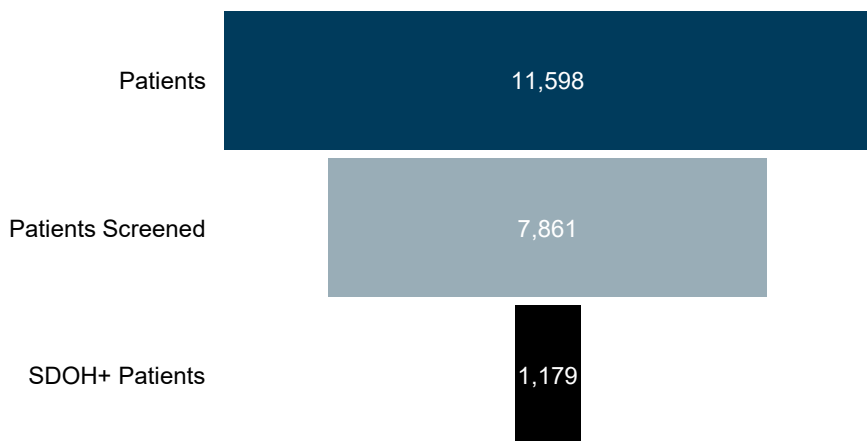
The Meaningful Access and Meaningful Connections programs are designed to collaborate closely, enhancing their effectiveness and community impact.

In year 3, the Social Health program broadened its reach to address patients' social drivers of health. Screenings occur at the community and school-based sites, serving all **149 Meaningful Medicine sites**. Patients who have not been screened in the last 12 months are screened on-site, with parents or guardians responding to the SDOH screener for patients under 18 years old. Our care-delivery model emphasizes providing resources once needs are identified. Patients who screen positive can choose to enroll in an individualized care plan or are referred to available resources through the Community Resource Hub, as applicable. **Across all SDOH needs, 15% of patients screened were positive for at least 1 SDOH need and of those, 48% enrolled in a care plan.**

Program Utilization and Growth



Cumulative Patient and Screening Volume



76%

Of patients were from historically underserved communities



72%

Of patients came from communities facing financial barriers



158

Community Outreach Events



354

Referrals made to Community Based Organizations via the Resource Hub

348

Patients enrolled in a care plan in Year 3

Of the patients that screened positive, food insecurity was the biggest need, followed by housing insecurity. Following a positive screening our Meaningful Medicine CHW and Referral Navigator care team successfully enrolled 3 out of 4 patients in care plans. The Meaningful Medicine Social Health program ensures that patients who need individualized support receive the care and resources to address their Social Health needs.

Percent of Patients Who Screened Positive
by SDOH Domain



62%

Of SDOH+ patients were
food insecure

73% Of patients enrolled
in a care plan



46%

Of SDOH+ patients were
housing insecure.

72% Of patients enrolled
in a care plan



39%

Of SDOH+ patients had
transportation needs.

69% Of patients enrolled
in a care plan



37%

Of SDOH+ patients had
utility needs.

74% Of patients enrolled
in a care plan

12%

Note: Number of Meaningful patients with at least 1 SDOH+ screening = 605. Percent of patients SDOH+ by domain is out of total SDOH+. Meaningful Medicine screening data from 11/7/2022 – 8/25/2025.

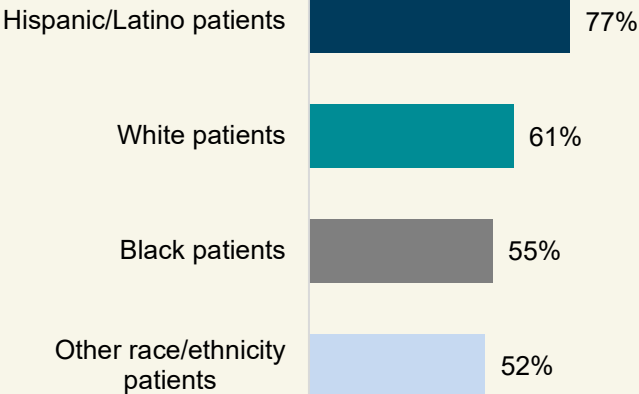
Unequal levels of access to the social health conditions that promote well-being can result in widening disparities in health outcomes, with some patients’ health improving while others stagnate or worsen. Hispanic/Latino patients were disproportionately represented in patients who screened positive for food insecurity. Similarly, White patients were disproportionately represented in patients who screened positive for housing insecurity, although this may be due to the small number of White patients who screened positive overall (N=51). Efforts to address food insecurity and housing for these groups in particular may mitigate worsening disparities in health outcomes.

Race/Ethnicity of Patients Screening Positive for Food Insecurity

77%

Of Hispanic/Latino patients screened positive for food insecurity

Overall, 62% of patients screened positive for food insecurity; however, prevalence was highest among Hispanic/Latino patients (77%), suggesting disproportionate food insecurity within this group relative to other racial/ethnic groups.

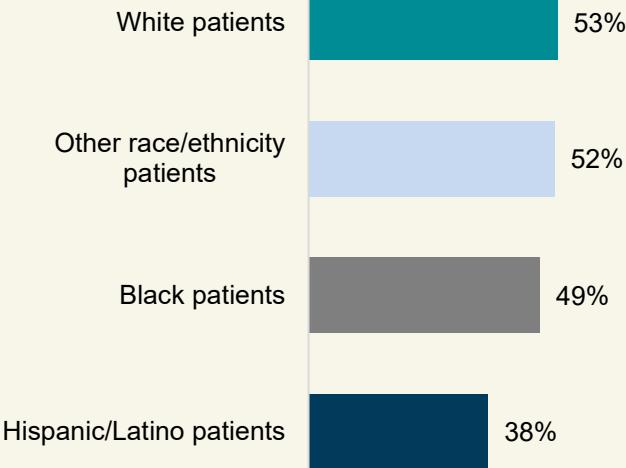


Race/Ethnicity of Patients Screening Positive for Housing Insecurity

53%

Of White patients screened positive for housing insecurity

Overall, 46% of patients screened positive for housing insecurity; however, prevalence was highest among White patients (53%), Black patients (49%), and patients with a race/ethnicity grouped as Other (52%), suggesting disproportionate housing insecurity within this group relative to other racial/ethnic groups. This disproportionality may be in part due to a smaller number of White patients (N = 51) and Other race/ethnicity patients (N=44) screening positive overall compared to Black and Hispanic/Latino patients.



Note: Number of Meaningful patients with at least 1 SDOH+ screening = 605. Percent of patients SDOH+ by domain is out of total SDOH+. Meaningful Medicine screening data from 11/7/2022 – 8/25/2025.

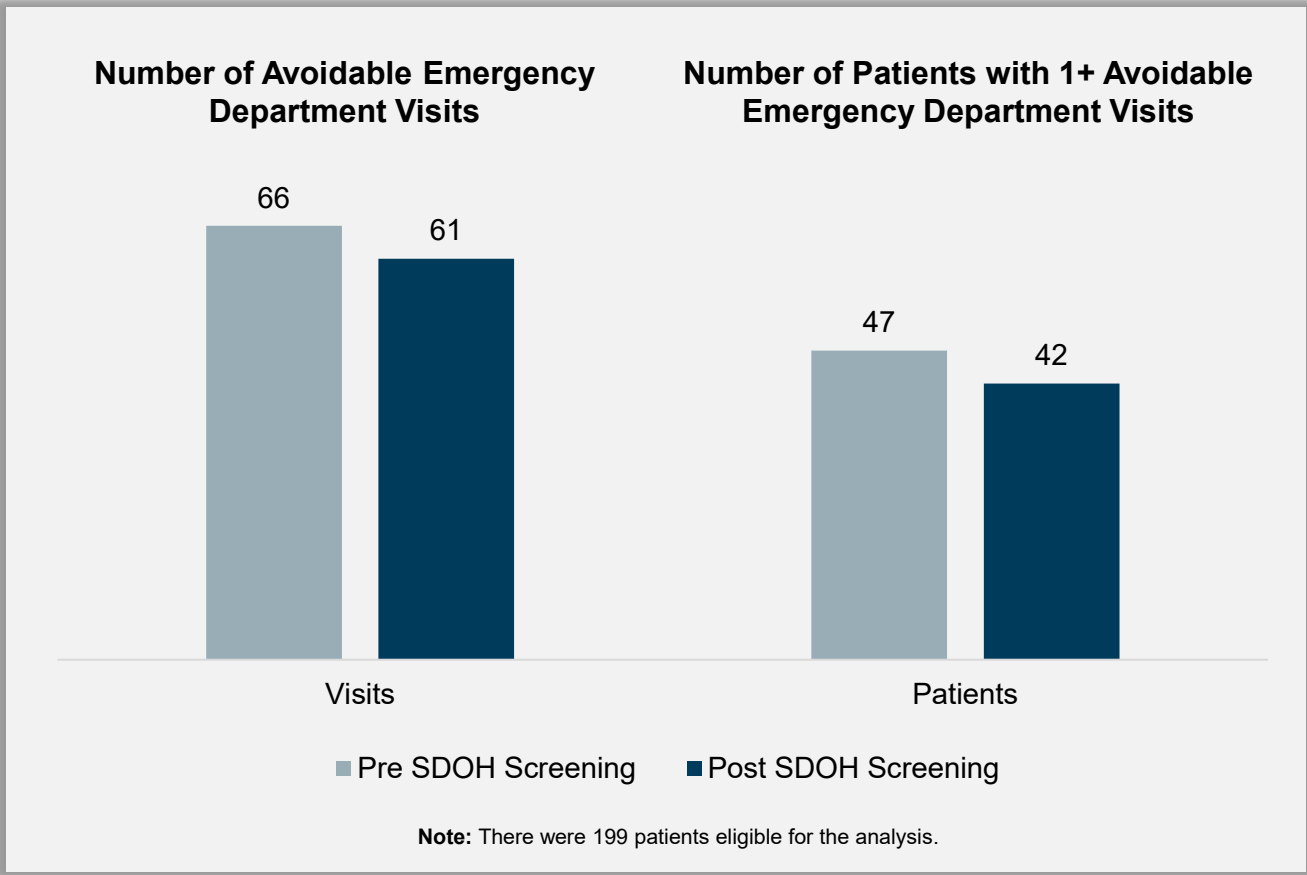
Avoidable Emergency Department Utilization

By addressing patients’ Social Health needs, the Social Health program aims to reduce inappropriate utilization of the Emergency Department (ED). Data from the first three years of the Meaningful Medicine program indicate that patients who successfully engaged with a Community Health Worker or Referral Navigator who were attributed to a Primary Care Provider within 6 months of engagement saw **an 11% reduction in avoidable ED utilization**. These results are particularly promising given that the Meaningful Medicine Social Health program is focused on connecting patients with needed social health resources, not necessarily on reducing avoidable ED utilization.

Overall, results suggest that by addressing SDOH needs and quickly connecting patients with primary care providers, the Social Health team may be reducing avoidable ED utilization, emphasizing the importance of pairing primary preventive care with social health resource connection.

11%

Reduction in avoidable ED visits for patients who engaged with the Social Health Program and were attributed to a Primary Care Provider



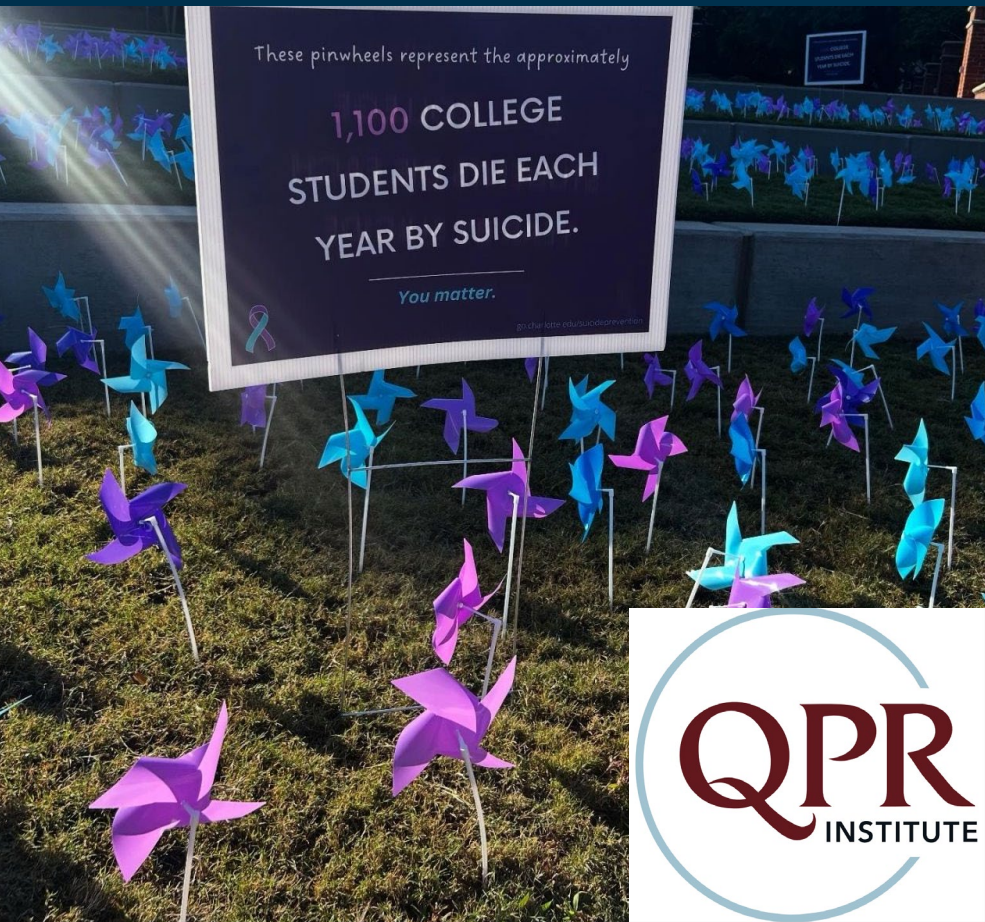


Question, Persuade & Refer (QPR)

Program Goal:

Rounding out Meaningful Connections initiatives, Question, Persuade & Refer focuses on delivering an evidence-based suicide-prevention curriculum, with the goal of serving approximately 900 9th grade students at 3 CMS Title I schools or community members by Year 5.

Question, Persuade, and Refer (QPR)



PROGRAM HIGHLIGHTS



3

CMS Sites Served



2

Community-Based Partners Added



558

Total Participants trained

Program Summary

Question, Persuade, and Refer (QPR) is an evidence-based suicide-prevention curriculum that teaches participants how to recognize warning signs of suicide crisis and effective ways to respond to these signs. The mission of QPR is to reduce suicidal behaviors and save lives by providing innovative, practical and proven suicide prevention training.

Under the Meaningful Medicine initiative, the prevention program is one of the arms of the Social Health strategy to identify youth at risk within schools. In partnership with the CMS district, Atrium Health teammates and Community Health Workers (CHWs) will teach QPR at participating schools to reach approximately 900 9th grade students over 5 years.

“The 3 simple steps anyone can learn to help save a life from suicide.”

Adapting to Legislative Change: Advancing Mental Health Training Beyond the Classroom

In August 2023, the North Carolina General Assembly enacted Senate Bill 49, known as the Parents' Bill of Rights. As this new state law was implemented across all North Carolina public schools, parental consent became a requirement for students to participate in QPR (Question, Persuade, & Refer) suicide prevention training.

In February 2025, due to the logistical challenges associated with this change, CMS decided to sunset the QPR program and transition to the Signs of Suicide (SOS) program.

In alignment with the broader goals of the Meaningful Medicine initiative, the Atrium Health team pivoted to expand QPR training to community-based sites. In year three, we secured partnerships with the YMCA of Greater Charlotte and UNC Charlotte to implement QPR training in community settings, thereby strengthening our shared commitment to promoting mental health awareness and suicide prevention through collaborative partnerships.

We look forward to deepening this partnership and expanding our collective impact – empowering more community members to recognize warning signs and foster a culture of support and connection.



Atrium Health

Partner Voices



“ True transformation is rarely the work of one; it thrives where purpose meets shared vision and quiet guidance. Each partnership and point of support create a framework for Meaningful Medicine, Meaningful Connections, and Access. Within this framework, Community Health Workers (CHWs) support communities by walking alongside individuals, linking them to health systems and social care resources, nurturing self-belief, and building inner strengths rooted in trust. What emerges is more than progress, it is new hope, breaking barriers and inspiring lasting change through every connection. Together, we are not just responders; we are hope givers and dream builders, uplifting the most vulnerable and inspiring a healthier, more resilient, and connected future **for ALL**. ”

– **Lorena Perez**, Supervisor,
Community Health Workers, Atrium Health



“ The Question, Persuade & Refer training offered through Meaningful Medicine is being provided for our team members at the YMCA of Greater Charlotte. The team members who have already participated in the QPR training have been empowered with the knowledge, confidence and compassion to recognize warning signs and other life-saving support within our community. Through this training, we are better equipped to foster a culture of care and connection, ensuring that no one faces their struggle alone. ”

– **Pamela Hempstead**, Association Director of Mental Health,
Community Well-Being & Impact, YMCA of Greater Charlotte



Student Bright Spot

“I had such an incredible experience. I learned so much about myself and about how the medical field works. I got to accomplish so much. Everyone that I interacted with was extremely supportive and respectful. They all made me feel like I belonged in the healthcare system. This internship opened my mind to going into med school as I had originally only wanted to go into nursing/nurse practitioner or Physician assistant. Shoutout to all of the incredible doctors on the pediatric rheumatology team, and my program manager Ja’von Harris. I also appreciate the nurses. I would not have been able to have this great of an experience if it wasn’t for them. I am so grateful for this opportunity, and I hope to be back next year if I am selected. Thank you so much!”

Sara Kanaan,
Providence High School.
MYEP Summer Intern



Community Health Worker Bright Spot

“During a meaningful connection referral from a school-based visit, I connected with a mother who was caught in a difficult cycle — she needed a job to qualify for financial assistance but couldn’t work because she lacked childcare. Together, we explored creative solutions, and I suggested she consider employment at a daycare where she might also receive discounted childcare. This approach empowered her to earn income, secure support for her child, and move closer to financial stability. It was rewarding to see her gain hope and take proactive steps toward her goals.

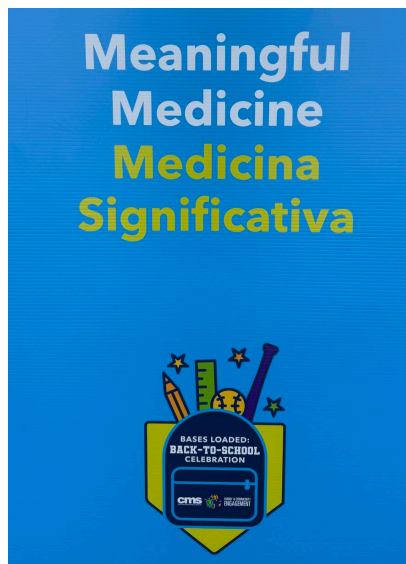
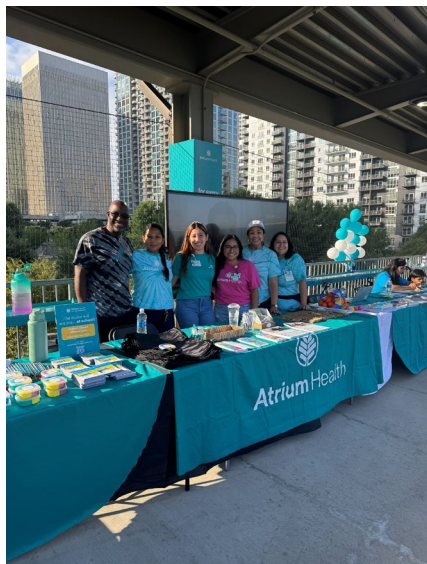
Dana Washington,
Community Health Worker
Atrium Health





Strategic Outlook for Meaningful Medicine

Marketing & Communication Strategy



Raising Awareness and Accelerating Results

The Charlotte Executive Leadership Council (CELC) and the CMS Foundation support a program called Executives in Residence – also known as EnRs. This initiative brings private sector top talent to the Charlotte-Mecklenburg School (CMS) system to share best practices and expertise.

Kelly Sapp, a strategic communication executive at Bank of America joined the EnR team in November 2024. In her role supporting Meaningful Medicine, she is responsible for leading the marketing and communication strategy, working closely with Atrium Health, CMS and community partners.

Key Milestones

Since the Meaningful Medicine partnership launched in 2022, marketing and communications has been a key indicator of utilization and success of the program. Since Sapp joined the team, awareness of the program has increased amongst Charlotte-Mecklenburg School families, students and staff.

In her capacity, she has convened subject matter experts to help move the work forward and developed a marketing and communication strategy and programmatic platform to help drive greater awareness. Sapp established management and communication routines across the partners, driving collective collaboration with a focus on shared goals.

Through key marketing and communication tactics and channels, the Meaningful Medicine program was highlighted at marque events such as the CMS Back to School celebration in August where over 10,000 CMS families visited. Through this multi-tier strategy, resources like School-Based Virtual Care, School-Based Virtual Therapy, and Atrium Health's student career pathways were front and center at CMS family engagement activities and in the school buildings. Through this initiative, CMS staff members learned in greater detail about the program and its resources as well as the impact to help CMS reduce absenteeism, bridge health access and wellness needs, and drive next generation of health care professionals through key student programs.

“

Communication and marketing strategies are a key tool that help to raise awareness and achieve business goals. The Meaningful Medicine program is an amazing story to share across multiple audiences. I feel so fortunate to support this important initiative that is making a significant impact across Charlotte and surrounding areas. It is truly an honor and privilege to be part of this collaboration and the opportunity to amplify the positive difference this program is making in our community.

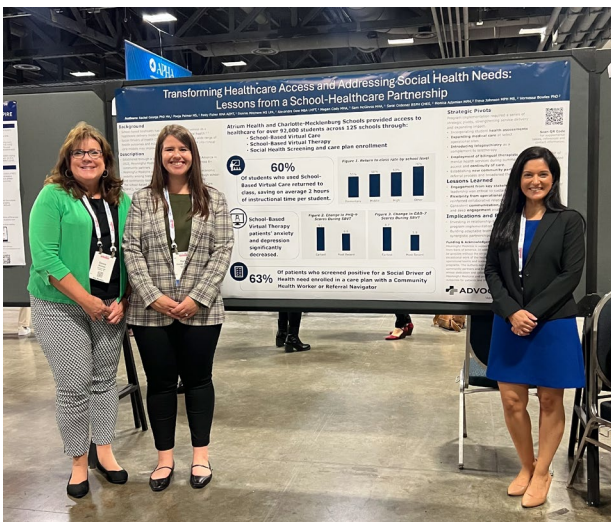
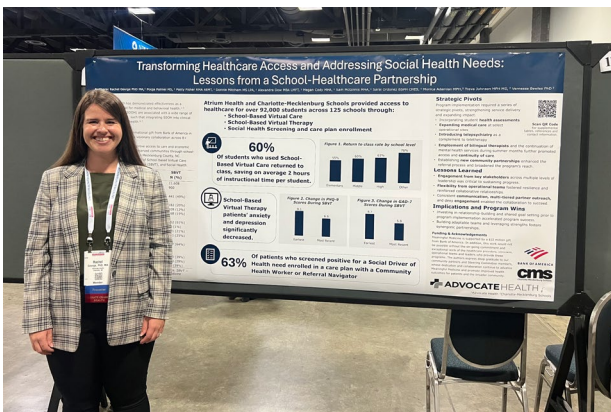
”



Kelly Sapp, Senior Vice President, Executive Communications, Bank of America
Executive-in-Residence, CMS Foundation

Notable News

Meaningful Medicine has received National Recognition through Research and Collaboration. A poster for Meaningful Medicine was presented at the American Public Health Association (APHA) Annual Meeting and Expo in Washington, D.C. from November 2 – 5, 2025.



In 2025, Atrium Health teammates **Dr. Rachel George, Donnie Mitchem and Pooja Palmer** represented Meaningful Medicine at the American Public Health Association (APHA) Annual Meeting and Expo in Washington, D.C. - one of the nation's premier gatherings for public health professionals, researchers, and policymakers. Participation in this national conference provided an opportunity to showcase our research and community health initiatives on a broader stage, while engaging with leaders advancing innovation in population health and health access.

Presenting our work at APHA elevated recognition of Meaningful Medicine beyond traditional marketing channels, highlighting the organization's role as a thought leader committed to addressing social drivers of health and improving outcomes for the communities we serve. This engagement also fostered valuable connections with academic partners, public health agencies, and peer institutions, supporting continued collaboration and shared learning.

Through participation in forums such as APHA, Atrium Health reinforces its dedication to advancing evidence-based practices, contributing to the national dialogue on public health, and driving measurable improvements in health access and community well-being.

Thank You!

Thank you to the contributing co-authors - **Patsy Amanda Fisher, Alexandra Dow, Megan Cody, Sam McGinnis, Sarai Ordonez, Monica Adamian (CMS), Treva Johnson (CMS) and Dr. Vernessa Bowles (CMS)** for their invaluable contributions that made this work possible.

Community Partnerships & Collaborations

\$4 Million Transformational Award from the Duke Endowment to support school-based program



The success of Meaningful Medicine has paved the way for continued expansion of the School-Based virtual care program in rural counties supported by grant funding from community partners. In July 2025, The Duke Endowment pledged \$4 million across five grants to significantly back Atrium Health's community development and rural healthcare programs. This donation represents the largest gift the Foundation has ever received from The Duke Endowment. Of the total amount, \$775,000 is allocated for creating an intuitive mobile app and web platform designed to enhance workflow and communication between CMS and Atrium Health, directly benefiting the Meaningful Medicine program.

Read the full article here:

[Atrium Health Foundation Receives Transformational Award from The Duke Endowment - Atrium Health Foundation Campaign](#)



\$2.08 Million Grant from The Leon Levine Foundation to Expand School-Based Therapy to Rural NC Counties



Children living in rural areas of North Carolina will have better access to mental health services thanks to a **\$2.08 million grant from The Leon Levine Foundation**. This funding will allow Atrium Health to broaden its School-Based Therapy Program, offering support to K-12 students in five rural counties. Supported by The Leon Levine Foundation, the program aims to address the unique challenges rural residents face in accessing mental health care, including students from low-income families attending Title I schools. This expansion highlights Atrium Health's strong commitment to serving all patients and families in its community and advancing its rural health strategy goals.

Read the full article here:

[Atrium Health Receives \\$2.08 Million Grant from The Leon Levine Foundation to Expand School-Based Therapy to Rural NC Counties](#)

Community Partnerships & Collaborations

Advocate Health Care \$1B investment on Chicago's South Side

Advocate Health Care is **investing \$1 billion** to expand access to primary care, specialty care, and wellness services across Chicago's South Side. This initiative represents one of the largest, long-term community health investments in the nation and is strategically designed to reduce the 30-year life expectancy gap between residents of the South Side and those living on the North Side.

Leveraging the proven **Meaningful Medicine** framework, Advocate Health Care is launching an evolved model - **Neighborhood Care Sites (NCS)** to further integrate health care and community resources. Ten new sites will be established to deliver comprehensive, family-centered services in accessible, neighborhood-based settings.

Similar to the Community Virtual Primary Care model successfully implemented in the Charlotte market, NCS locations will connect patients virtually to Advocate providers in trusted community spaces such as churches and community centers. These sites will offer routine health services including treatment for common illnesses, annual physicals, lab testing, chronic disease management, contraception, and medication refills.

Onsite medical staff will also serve as care navigators, linking patients to primary care providers and essential social support services such as food, housing, and transportation assistance. This integrated approach reflects an evolution of the Meaningful Medicine model - one that enhances coordination, strengthens community partnerships, and promotes sustainable access to high-quality, whole-person care.



School-Based Telehealth Programs Represent Atrium Health in the Carolinas School-Based Telehealth Learning Collaborative

Atrium Health's School-Based Virtual Care and School-Based Virtual Therapy have participated in the Carolinas School-Based Telehealth Learning Collaborative since inception. Our School-Based virtual medical and therapy teammates were instrumental to securing initial TDE funding dedicated to fostering collaboration and co-learning across healthcare systems, so to enhance patient services and improve health outcomes state-wide. This year, both programs presented in the **Annual Carolinas School-Based Telehealth Learning Collaborative Fall Meeting** alongside other leaders in this space, including The Center for Virtual Care Value and Excellence at UNC-Chapel Hill as well as the MUSC Boeing Center for Children's Wellness. **Patsy Fisher** presented on the Physical Health Track Panel: Using Point of Care Testing to Improve Program Outcomes; **Sam McGinnis** presented on the Physical Health Track Panel: Using the Best Person to Reach the Goals of Your Program; and **Donnie Mitchem** presented on the Behavioral Health Track Panels: School-Based Models for Virtual Behavioral Health as well as Challenges and Success for Billing for Virtual Behavioral Health Services. By sharing best practices and lessons learned in school-based telehealth, these teammates are leading the way to improve patient outcomes across the Carolinas.



