

A Study on Addiction Recovery with MAXIMUS in California:

Learn how Mozzaz Digital Health is being used in California's Diversion Program managed by MAXIMUS: Mobile Addiction Recovery Support for Health Professionals

In 2003, MAXIMUS was contracted by eight healthcare licensing boards under the California Department of Consumer Affairs (DCA) to operate the State's diversion program — a voluntary program that offers comprehensive referral and monitoring services to licensed professionals struggling with a substance abuse disorder or mental illness. The DCA's diversion program provides participants with the necessary counseling, treatment and monitoring to encourage their return to work, without endangering public health or safety, while also establishing long-term recovery practices.

In order to resume work, participants must successfully complete the initial phases of the diversion program including frequent contact with program staff, drug testing, and attendance at support groups. To complete the program, participants must meet the program requirements for a minimum of 2-4 years, then complete a transition period of at least 1 year.

Implementing Mobile Engagement

In September 2017, MAXIMUS partnered with Mozzaz, a digital health company, to implement its patient engagement solution in a phased approach starting with existing program participants licensed by the Board of Pharmacy. Once internal privacy and security protocols for PHI and PII were standardized in the summer of 2018, secure messaging was implemented and the Mozzaz mobile platform was deployed to five of the remaining California health professional licensing boards participating in the program (Dental Board, Physical Therapy Board, Physician Assistant Board, Osteopathic Medical Board, and Veterinary Medical Board).

Goals for the mobile tool within the program are to further decrease the relapse rate and increase program participation through the following activities:

- Increasing ease of use and engagement with program participants
- Providing the ability for participants to stay connected and access resources at any time
- Streamlining scheduling
- Reducing the amount of paperwork and telephone calls staff receive
- Accessing participant data and feedback in real-time

These program participants have a five-year relapse rate of 13%, as compared to a 50-75% relapse rate for individuals who do not participate in an intensive, high-touch case management and monitoring program. Participants self-report or are referred to the program by their professional licensing board and their ability to retain licensure and return to work is predicated on successful completion of the program.

Figure 1 – The California Department of Consumer Affairs oversees a diversion program that achieves a five-year relapse rate of just 13%.

AVERAGE 5-YEAR RELAPSE RATES



50-70% will relapse following traditional treatment



Only 13% will relapse following California's diversion program

Features for Participants

The Mozzaz mobile platform allows participants 24/7 access to the resources of the diversion program. Participants use the app to submit self-assessment forms and documentation of attendance at 12-step meetings, outpatient treatment, support groups and more. Certain responses (or lack of submissions) trigger immediate alerts to the care management team, who can then follow up with the participant directly. Participants contact their case managers, conduct video check-ins, receive push notifications about upcoming commitments and requirements from the personalized in-app calendar, and access both online and community resources.

“We selected Mozzaz for its versatility to adapt to our processes and care delivery model, helping us refine the content to make it scalable and measurable. The Mozzaz platform allows personalization right down to individual plans based on the data from point of care.”

– Jennifer Wattum, Senior Director
Business Development, MAXIMUS

Features for Staff

In addition to the mobile app, the Mozzaz platform also includes a web portal and database for program staff that tracks participant usage data in real-time. This allows staff the ability to monitor and adapt to participant activity as it occurs by sending push notifications and/or messages, conducting check-ins, and making immediate updates to available resources such as the Approved Medications list, as needed.

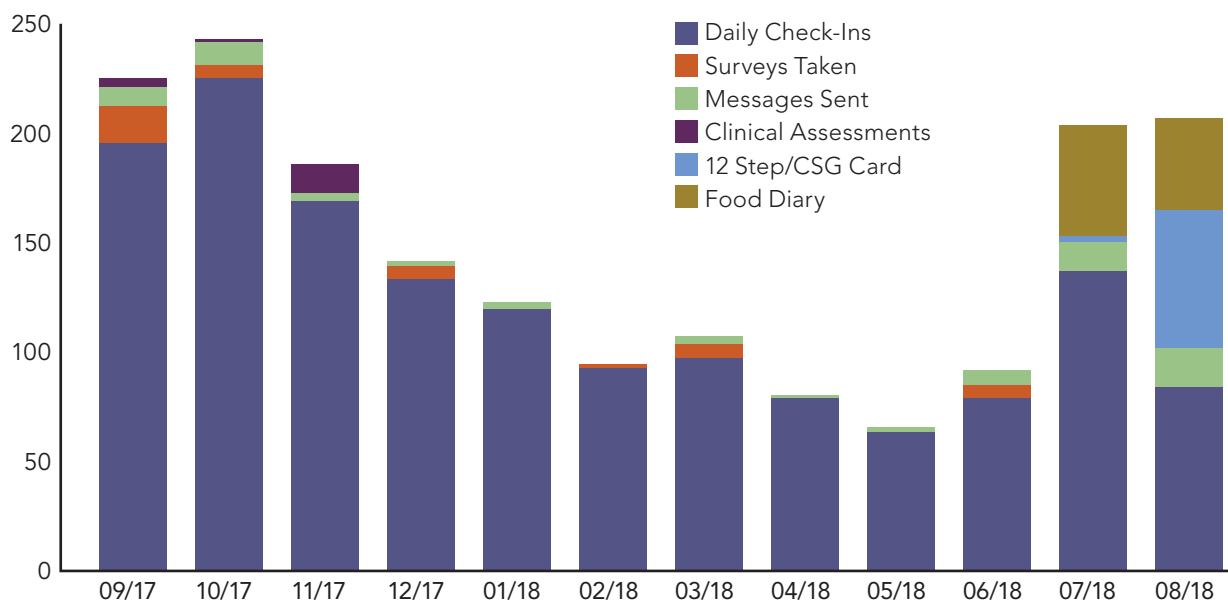
Other uses include the ability to create and maintain care plans, schedule activities, assign users to specific case managers, post and push relevant content and alerts, create custom data reports, and provide peer education and support. Data generated from platform usage is used for state-level reporting and for continuous improvement of the program.

While use of the mobile platform is voluntary, it has proved popular with participants and has drastically reduced paperwork and telephone interaction which program staff receive, while increasing access, support and participation of program members.

System Usage

MAXIMUS hypothesized that the Food Diary, 12-step check-ins, and requests to contact the case management team would be the most popular elements of the platform. However, we found that despite month to month variations, the most useful element is the daily self-check feature that helps the staff to reach out to program members if specific issues are identified.

Figure 2 – System Use Statistics



Based on data collected, **participation increased by an average of 42%** on a month-over-month basis after completing the content changes indicating that participants and staff were getting a greater return on investment from using the platform.

Additionally, participants reported that the video check-in feature is particularly useful for individuals who need to meet required checkpoints with their case managers or meet face to face with the licensing boards to review their progress. Participants also reported that completion of required forms, daily food diaries, and accessing standard documents within the app is much more effective than faxing or mailing forms or accessing static information on a website.

Conclusion

The continued success of California's diversion program, administered by MAXIMUS and combined with the robust Mozzaz mobile platform, offers an effective model for protecting public health and safety, treating addiction and helping recovering individuals to return safely to productive lives.

"Having the participants use their phone to complete the meeting attendance card is convenient, and I appreciate being able to video chat when our processes don't give us the opportunity to actually see the participants for several weeks."

– Case Manager, Health Professional
Diversion Program

"Being able to use the app [to document my] 12-step attendance is much more convenient than bringing paper to the meetings! I also like to use the calendar as a reminder to check in with MAXIMUS daily for random drug testing."

– Participant, Health Professional Diversion Program

In partnership with
mozzaz
care everywhere
mozzaz.com