



# Reusable, Evidence-Based Infrastructure for Digital Patient Engagement, EMA & Adaptive Intervention

<b>+31.4%</b> Medication Adherence	<b>-50%</b> Treatment Discontinuation	<b>+37.3%</b> Refill Persistence	<b>+85%</b> Disease Literacy	<b>-2hr/wk</b> Case Manager Time	<b>+91%</b> Patient Retention
---------------------------------------	--	-------------------------------------	---------------------------------	-------------------------------------	----------------------------------

## PLATFORM OVERVIEW

### A Decade of Adaptive Digital Health Infrastructure

MEMOTEXT is a modular, research-grade digital engagement platform purpose-built to operationalize Ecological Momentary Assessment (EMA) and Just-In-Time Adaptive Interventions (JITAs). Since 2012, it enables academics, clinicians, and health systems to rapidly build, validate, and co-commercialize digital interventions — without bespoke, single-use solutions that don't survive a single grant cycle.

Adaptive logic re-segments iteratively throughout a study, supporting micro-randomization, stepped-support, and JITAI optimization designs. Intervention logic is driven by self-report, wearables, claims, lab values, and EHR indicators.

## PLATFORM CAPABILITIES

### Flexible, Composable Omni-Channel Toolkit

<b>Omni-Channel Delivery</b> SMS · IVR · WhatsApp · Voice · iOS · Android · PWA. Broadest reach across device access and bandwidth constraints.	<b>Deep Data Integration</b> REDCap · FHIR · Fitbit · HealthKit · EHR · Claims · Salesforce. Real-time data feeds drive adaptive logic.
<b>JITAI &amp; Adaptive Logic</b> Rule-based, weighted, and micro-randomized sequencing. Re-segmentation throughout study lifecycle. Optimization trial-ready.	<b>EMA &amp; Assessments</b> HIPAA/PHIPA-secure health assessments. Rapid deploy. Event-triggered and longitudinal EMA with automated safety escalation.
<b>Governance &amp; Safety</b> Configurable consent management, full audit logging, predefined safety escalation. HIPAA · PHIPA · PIPEDA compliant.	<b>Analytics &amp; Prediction</b> Advanced ML analytics, AE detection, ML-flagged responses with human review, and retention-aware engagement modeling.

TRUSTED PARTNERS — POWERING 50+ HEALTH SYSTEMS

CAMH · Mass General Brigham · Johns Hopkins Univ. · Vanderbilt VUMC · NYU Langone · SickKids · Nationwide Children's · McKesson · Humana · UBC

# Beyond Messaging: Intelligent, LLM, RAG, Conversational - AI Patient Engagement

MEMOTEXT programs can provide a containerized LLM layer with Retrieval-Augmented Generation (RAG) — enabling clinically appropriate conversational AI grounded in vetted, study-specific knowledge bases. Unlike generic LLM deployments, RAG architecture dramatically reduces hallucination risk in health contexts. Rules-based and LLM pathways are composable: all within a single participant interaction. Ask the MTxPERT @ <https://memotext.com>

- Secure, containerized LLM deployment
- RAG with vetted clinical knowledge bases
- Hybrid rules-based + LLM conversation logic
- Automated escalation to human review
- Clinically approved, regulatory-ready design
- MTxPERT — production conversational agent
- AE detection via ML response parsing
- Multilingual & accessibility-aware delivery

## VALIDATED PROGRAMS

### Co-Created Across Mental Health, Chronic Disease & Care Coordination

#### T1 DIABETES · CHATBOT

##### KiT — Keeping in Touch

Combined LLM + rules-based SMS chatbot for care coordination & diabetes education in youth with T1D.

🔗 SickKids · McGill MUHC

#### T2 DIABETES · ADHERENCE

##### REACH

Validated improvements in T2DM treatment adherence and HbA1c outcomes. Pre-diabetes bot variants available.

🔗 Vanderbilt University Medical Center

#### MENTAL HEALTH · NAVIGATION

##### BeWell Mental Health Navigator

Dynamic text-messaging service matching users to mental wellness supports, with secure live peer/clinical chat.

🔗 CAMH

#### SMI & OUD · APP

##### App4Independence (A4i)

Clinical portal + mobile app for care coordination and relapse prediction in psychosis-spectrum illnesses.

🔗 CAMH · A4i.me

#### SMOKING CESSATION

##### Chat-V Varenicline Chatbot

AI conversational agent for varenicline adherence. Addresses >30% dropout within 2 weeks of treatment.

🔗 CAMH · Dr. Nadia Minian, PI

#### PEDIATRIC HSCT

##### BMT4me — Spanish Adaptation

Culturally adapted mHealth app .SUS scores 84.2 (providers) and 87.5 (caregivers), above 68% threshold.

🔗 Nationwide Children's Hospital

#### EQUITY-FIRST DESIGN

MEMOTEXT's architecture is a deliberate equity design — reducing participation barriers for individuals with limited device access, bandwidth constraints, or varying literacy levels. Multilingual delivery and accessibility-aware design are standard features. Governance, safety, and equity are embedded at the infrastructure level.

#### CO-CREATION & MARKETPLACE

MEMOTEXT enables academics and clinicians to co-create interventions and (co)commercialize them on a curated [marketplace](#) of digital programs — accessible to provider, insurer, and pharmaceutical clients. Rather than bespoke builds, the reusable infrastructure model accelerates study activation and reduces per-study cost.

*"Our Mission: We make health data useful." — Evidence, empathy & experienced design since 2012. Trusted by 50+ health systems.*



RESEARCH INFRASTRUCTURE

# Designed for Reuse Across Studies & Grant Cycles

A defining distinction of MEMOTEXT is that digital methods infrastructure is explicitly designed for reuse — not single-study bespoke development. Investigators contribute science and study-specific design; MEMOTEXT provides a stable, validated methods substrate — enabling faster study activation, lower per-study cost, and methodological continuity across grant cycles.

### INVESTIGATOR-DEFINED (PER STUDY)

- Research question & hypotheses
- Target population & care context
- Behavioral / clinical theory
- Study-specific content & messaging
- Adaptive intervention design intent
- IRB / ethics protocol

### REUSABLE MEMOTEXT INFRASTRUCTURE

- Low-burden EMA delivery (SMS-first, multimodal)
- JITAI adaptive logic: rules, weighting, micro-randomization
- Longitudinal engagement engine, retention-aware delivery
- Data integration: REDCap, wearables, EHR, claims, FHIR
- Governance: consent, audit, escalation, safety flagging
- Conversational AI: RAG, secure LLM, hybrid pathways
- HIPAA · PHIPA · PIPEDA | Multilingual · Equitable

### SELECTED REFERENCES

- › Literature Summary & Lit Review (2025) — <https://mtxt.io/lit> · JITAI Design Patterns (2024) — <https://mtxt.io/JITAI>
- › Nelson LA, Bergner EM, Adler A et al. (2026). PRECIDENTD Study SMS Program. Medical Care (Supplement).
- › Minian N et al. (2023). Co-creation of a conversational agent for varenidline adherence. BMJ Open.
- › Benhayoun et al. (2025). Transcreating BMT4me for Spanish-speaking caregivers in pediatric HSCT. JMIR.

### TRUSTED PARTNERS — POWERING 50+ HEALTH SYSTEMS

CAMH	Mass General Brigham	Johns Hopkins University	Vanderbilt University
NYU Grossman	SickKids	Nationwide Children's	McKesson
Humana	GreenShield	UBC	Kids Help Phone

Contact us: <https://memotext.com>

LinkedIn: <https://www.linkedin.com/company/memotext-corporation/>