

PURPOSE

In 2015, CDC funded the **Colorectal Cancer Control Program** (CRCCP) to increase colorectal cancer (CRC) screening rates. The Washington State Department of Health (WSDOH) received CRCCP funds and partnered with a large federally qualified health center, HealthPoint, to implement a direct-mail FIT^a program.

^aFIT—fecal immunochemical test for CRC screening

INTERVENTION

Health Point used the FIT program at 9 clinics among 5,178 patients who were not up-to-date with their CRC screening.



9 clinics mailed FIT kits in the patient’s language, sent 50th birthday CRC screening information cards, and maintained existing patient reminder systems.



4 of the 9 clinics also staffed FluFIT events and MammoFIT events, where FIT kits and CRC screening education were provided.

KEY TAKEAWAYS

- Nearly one third of patients due for CRC screening successfully participated in the FIT program.
- These findings can help other clinics plan and use the FIT programs to serve disadvantaged populations
- Additional strategies may be needed to increase CRC screening among people not returning FIT kits.

STUDY QUESTIONS



What percentage of mailed FIT kits are returned?

Can mailed FIT interventions be conducted at a reasonable cost?



RESULTS

31% of mailed FIT kits were returned
(1,607 of 5,178)

Average cost of implementing the intervention, per kit returned^b **\$18.76**

Average cost of total intervention per kit returned^c **\$40.00**

^bIncludes cost of patient selection; mailing of FITs and birthday letters; FluFIT and MammoFIT sessions, and follow-up.

^cIncludes costs associated with intervention development, implementation, management, and assessment, as well as clinical costs.

