



Purpose

In 2015, CDC funded the **Colorectal Cancer Control Program** (CRCCP) to increase colorectal cancer (CRC) screening uptake.

The purpose of this study is to evaluate the cost and effectiveness of the **West Virginia Program to Increase Colorectal Cancer Screening** (WVPICCS) in implementing patient reminders to increase **fecal immunochemical test** (FIT) kit return rates in nine **Federally Qualified Health Centers** (FQHCs).

Study Questions

1. What was **the effect** of the patient reminder system on **increasing FIT kit return rate**?
2. What was **the cost of implementing a patient reminder system**?

Interventions

Most health clinics conducted telephone reminders to patients who did not return the FIT kit within 14 days. Some health clinics made a second call and mailed a reminder letter, if necessary.



The total number of calls made by FQHCs ranged from 73 to 1,177, which reflected the size of the program, the intensity of the interventions, and the period of performance (10 to 17 months).

Results



The telephone and mailed reminder interventions **increased the average FIT kit return rate by 19.6 percentage points** (from 41.1% to 60.7%).



The **average total cost** of tracking and mailings per FIT kit returned across all FQHCs was **\$60.18** (\$8.99–\$352.78).



The **average cost of only reminders** (which included the cost of reminder phone calls and letters) per FIT kit returned was **\$11.20** (\$3.13–\$25.47).

Key Takeaways

- **Cost varied widely**, especially for tracking, across the rural FQHCs.
- Rural FQHCs can use reminder systems as part of a multilevel strategy to **increase FIT kit return rates**.
- FQHCs with high-quality health information systems that enabled tracking of patients were able to **implement lower-cost reminder interventions**.

