



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP120229

Project Title:
Evidence-based colorectal cancer screening for the uninsured

Award Mechanism:
Evidence-Based Prevention Programs and Services

Principal Investigator:
Gupta, Samir

Entity:
The University of Texas Southwestern Medical Center

Lay Summary:

Screening for colorectal cancer (CRC) can lower rates CRC death and even prevent some cancers from developing. However, screening rates are low, especially for uninsured patients. As a result, uninsured patients are more likely to develop CRC and die. For example, at John Peter Smith Health system (JPS), the main health system serving uninsured patients in Tarrant County and Fort Worth, Texas, just 39% of uninsured patients served have had screening, and the majority of patients who develop CRC have advanced cancer at time of diagnosis.

UT Southwestern and JPS previously received a grant from CPRIT to develop and test a CRC outreach program for uninsured patients at JPS. The program sent mailed invitations to complete screening to over 2,000 uninsured patients who needed screening. To figure out which screening test was most likely to be completed, some patients received a simple, at home kit that checks the stool for blood called a fecal immunochemical test (FIT), while others were invited to schedule and complete a colonoscopy. All patients received phone calls to encourage screening completion, answer questions, and help with scheduling tests and follow up.

The prior program was a big success. At the end of 12 months, 1 in 3 patients who were not up-to-date with screening at the beginning of the program got screened. Screening was two times higher when patients were offered the simple at home FIT compared to when offered a colonoscopy. We found 4 patients with CRC, and another 60 patients with potentially precancerous polyps.

Since the program was such a success, we would like to now expand the outreach program to benefit all 10,000 uninsured patients at JPS. Also, we need to equip JPS to run the program on its own, so that JPS can deliver the program to its patients on an ongoing basis. Because screening with FIT needs to be done every year, we need to also expand the program to deliver the outreach invitations yearly. Finally, we know that the program can be improved even more. Offering patients a small financial reward may help nudge them to complete healthy behaviors. Therefore, we also plan to see if adding a small \$5 or \$10 reward for screening to our outreach program results in more patients completing initial and repeat screening.

As a result of the new program, we will create a sustainable CRC screening outreach program for uninsured patients in Tarrant County and Fort Worth, Texas. The program

will serve as a model for other health systems which care for uninsured patients across Texas and beyond. Also, we may discover new ways to convince more patients to be screened that can be used locally and nationally. Most importantly, we will offer potentially lifesaving CRC screening to over 10,000 patients, expect over 3,300 patients will get screened, and predict we will find 20 patients with CRC and 180 patients with potentially precancerous polyps.