The purpose of this document is to provide a description, progress update, and participation table for the Utah CRCCP by the Center for HOPE at the University of Utah Huntsman Cancer Institute in partnership with AUCH and the Utah Community Health Centers.

Utah Colorectal Cancer Control Program (CRCCP)

About the Project
The goal of the Utah CRCCP is to work with CHCs to implement evidence-based interventions (EBIs) to increase colorectal cancer screening (CRC) among the clinics' eligible patients (e.g., those 45 years of age or older). These EBIs include changes to electronic health record (EHR) systems to optimize:
- Provider reminders (PR),
- Provider assessment and feedback (PAF), and
- Patient/Client reminders (CR).

The project also establishes a link to patient navigation (PN) for patients who need follow-up screening or diagnostic care after an initial screening returns suspicious findings. This project is funded by the Centers for Disease Control and Prevention (CDC) and runs from **7/1/2020 – 6/30/2025**. This program includes funding to pay for colonoscopies at the Medicare reimbursement rate for those who are uninsured and living at or below 200% FPL.

Program Requirements/Impacts
All clinics will:
- Sign MOU – basic agreement that they will work with us and provide data requirements
- Participate in readiness assessment – usually one hour meeting with QI, provider/MA team, leadership (as needed) to see how the Utah CRCCP team may be able to assist
- Complete baseline data survey (by end of program year – June 30th)
- Participate in implementation meetings – usually 1 hour as needed – we can often work on multiple EBIs
  - i.e., changes to EHR, changes to workflow (using PVP/huddle), customizing APO for patient reminders
  - Clinics need to implement at least two EBIs (however, most are already doing some form of PR and PAF so these are not new for them, just a way to optimize)
- Complete annual data survey (both 9/30 and 3/31 each year)
- Participate in any follow-up technical assistance meetings
  - We are starting try to check-in via email monthly, but meetings are less frequent and depend on where the clinics are in implementation
- Patients will receive reminders if clinic/health system use the APO campaigns

Project Updates
Most of the EBIs are utilizing the Azara platform, so the additional burden on clinic staff at this point should be minimal. Since they are learning the new system anyway, we are trying to engage them early to show how Azara makes the work more manageable for them.
In program year one (7/1/2020 – 6/30/2021), Utah CRCCP engaged with:
- Carbon Medical

- o PR – Azara is now fully implemented. Carbon starting to explore using PVP/huddles
- o CR – Looking into using APO campaign for FIT return and possibly mailing FIT kits
- o PAF - Azara dashboards for PAF
- o PN – not currently using. They are keeping this in-house with care coordination
- Family Healthcare
  - o PR - They are using PVP – need to assess if all provider teams are using
  - o CR - Using APO campaign for FIT return. Awaiting access to APO for screening reminder to filter for mailing campaign
  - o PAF - Using dashboards for PAF
  - o PN - Connected CHWs at FHC with Cristina and Sarai for PN support

In program year two (7/1/2021 – 6/30/2022), Utah CRCCP initiated work with:
- Utah Partners for Health
  - o PR - Using PVP/huddles
  - o CR - Using APO for FIT return. Awaiting access to APO for screening reminder to filter for mailing campaign
  - o PAF - Using dashboards for PAF
  - o PN – Using e-referral in eCW to connect with Cristina. Patients are being referred.
- Green River Medical Center
  - o PR – using PVP/huddles – only two providers, and one has become a champion for PVP
  - o CR – not currently using – will follow-up
  - o PAF – using Azara dashboards
  - o PN – trained Cody on e-referral and the program. No patients referred yet
- Creek Valley Health Clinic
  - o PR – Since CVHC is not on Azara – Leticia helped set up practice configured alerts in eCW and they are working on setting up additional ones
  - o CR – Leticia helped set up reminder in eCW messenger in June
  - o PAF – currently a manual process, but working well. Once Azara is implemented it will help automate the process
  - o PN – trained on the e-referral process and connected to Cristina.
- Utah Navajo Health System, Inc.
  - o PR – some provider teams using PVP/huddles.
  - o CR – not using APO yet
  - o PAF – using Azara dashboards
  - o PN – talked through options. Need to follow-up on how implement
- Wayne Community Health Center
  - o PR – using PVP/huddles
  - o CR – started using return FIT APO in July
  - o PAF – using dashboards
  - o PN – trained on e-referral and connected to Cristina. Referrals should start coming

So far, in program year three (7/1/2022 – 6/30/2023), Utah CRCCP initiated work with:

- Midtown Community Health
    - PR – completed PVP intensive implementation with Azara
    - CR – started using return FIT APO in July
    - PAF – using Azara dashboards
    - PN – need to set up training with appropriate staff

In program years 3 – 5
- We will identify additional health systems to implement in year 3
- Implement Referral Module for all participating clinics that are interested
- Implement custom APO referral campaign with all participating clinics
- We will continue working with existing health centers on annual data collection
- Any additional technical support they may need.
- Further refine any EBI implementation
- Recruit remaining health centers by proactively reaching out and/or when they indicate interest:
    - Mountainlands
    - Enterprise
    - Bear Lake
    - Four Points
    - CHC, Inc.
    - 4th Street will not be participating in Utah CRCCP

For additional information about CRCCP, please contact Program Manager Leanne Peters at Leanne.Peters@hci.utah.edu