



Peer-to-Peer Learning Call Series Summary of Innovations

EHR Best Practices: Using Reminders and Alerts

The Enhancing Cancer Program Grantee Capacity through Peer-to-Peer is a peer-informed learning and engagement opportunity that supports recipients of the National Breast and Cervical Cancer Early Detection (NBCCEDP) Program and the Colorectal Cancer Control Program (CRCCP) to engage with their peers on important topics.

The webinar, “EHR Best Practices: Using Reminders and Alerts,” featured Dr. Gloria Coronado, a leading epidemiologist in cancer screening and health disparities, and focused on practical strategies for implementing effective cancer screening reminder systems in clinical and community settings. The presenter provided evidence-based guidance and real-world examples for designing and scaling cancer screening reminder programs.

Summary of Innovations

Implementation of Cancer Screening Reminders

Effective, scalable strategies are essential to improve cancer screening rates, especially among underserved populations.

- Reminders address patient forgetfulness, lack of awareness, and access issues.
- They are low-cost and can be delivered via letters, postcards, phone, text, email, and patient portals.
- The Community Guide for Preventive Services recommends reminders.
- Evidence shows reminders increase screening rates: mammography (10-20%), cervical (10-15%), colorectal (5-20%).
- Combining reminders with education, navigation, and logistical support enhances effectiveness.
- Reminders work best when integrated into multi-component, multi-modal approaches.

Effective Strategies and Modalities

Choosing the right reminder method and tailoring messages improve outcomes.

- Digital reminders, such as texts and emails, are cost-effective and preferred, especially among younger populations.
- Personalization based on patient history, demographics, and language improves response.
- Multimodal approaches that combine reminders with education and support are more effective.
- Focused efforts on underserved groups can significantly impact screening disparities.
- Data from Kaiser Permanente show that 40% of colorectal screening comes from prior colonoscopies, with incremental increases from mailed FIT tests (20%) and automated reminders (10%), resulting in an overall 82% screening rate.

- A 2018 study at a federally qualified health center found that combined reminder modalities increased screening, with Spanish speakers responding better to combined automated and live calls.

Tailoring Messages for Diverse Populations

Culturally relevant, tailored messaging increases engagement and screening.

- Videos and animations explaining procedures, such as FIT testing, are effective educational tools.
- Example videos targeted African American and American Indian populations, emphasizing cultural relevance.
- Tailored messages that use "I" statements and address specific community concerns improve receptivity.
- Videos explaining colorectal cancer screening can be engaging and informative, with high-quality animations making complex procedures understandable.
- Language and cultural tailoring are crucial, especially for populations with lower screening rates, such as Hispanics and underserved groups.

Challenges and Limitations of Reminder Programs

Despite proven effectiveness, barriers remain.

- Variable effect sizes across studies and persistent access barriers limit impact.
- The digital divide affects reach, especially in rural areas with limited internet or phone service.
- Some clinics hesitate to use digital methods due to concerns about spam or privacy.
- Policies supporting telehealth and insurance coverage for follow-up procedures can enhance program success.
- Integration into electronic health records is critical for scalable, sustainable reminder systems.

Case Studies and Innovative Approaches

Real-world examples demonstrate successful implementation.

- Kaiser Permanente's incremental approach increased colorectal screening to 82% through prior colonoscopies, mailed FIT tests, automated, and personalized outreach.
- Federally funded studies show opt-in strategies can achieve high return rates (68%) for FIT tests.
- Combining high-reach methods like text messaging with high-effectiveness methods like live calls can optimize outcomes.
- Video text messaging is a promising, cost-effective method to counter myths and misinformation, especially when culturally tailored.
- The PRIME study partners with community clinics to provide resources and use video/text interventions to improve screening among diverse populations, including Latinos and those with language barriers.

Policy and System-Level Supports

Policy changes can improve screening rates and access.

- Coverage for follow-up colonoscopies and telehealth services is essential.
- State and national policies in Oregon have expanded insurance coverage for screening and follow-up procedures.



- Policy support can incentivize clinics and health plans to adopt reminder programs.
- Multi-level interventions, including policy, system, and community efforts, are necessary for sustained impact.

Use of AI and Digital Tools in Health Education

Innovative approaches, including AI avatars and videos, may be used to improve patient education and screening for colorectal and other cancers.

- Highlights success in reaching patients via email with links to educational videos.
- Emphasizes AI as a complement to health education, using avatars like Mariana to deliver tailored information.
- AI tools can support training, reduce staff burnout, and improve patient outreach through multiple channels (email, text, portals, community workers).
- AI can potentially lower program costs and support bundling of screening topics, especially in rural or small clinics.
- Mariana, an AI health coach, offers modules on colonoscopy preparation, procedure, and post-care, with videos tailored to different populations.
- AI avatars can be used in clinics, community events, waiting rooms, or sent via mail with QR codes.
- AI tools can also train navigators and support multi-component reminder systems that combine education and prompts to increase screening rates.
- Future developments include making avatars interactive to answer patient questions.

Challenges in Patient Navigation and AI Solutions

Some common barriers in patient navigation can be addressed using AI.

- Common challenges include a lack of leadership support, poor integration with gastroenterology, insufficient training/resources, staffing turnover, difficulty reaching patients, funding instability, and EHR limitations.
- AI can assist in systematically training teams, helping standardize competencies.
- AI does not tire, making it useful for delivering consistent education and reducing staff fatigue.
- AI can reach patients through various digital channels, including email, text, portals, community health workers, and mail.
- AI may help reduce program costs and support the bundling of multiple screening topics.
- AI avatars can be used in diverse settings, such as waiting rooms, community events, or remote communication.
- AI can also be used to train navigators and support multi-component reminder programs that include education and follow-up.

Ongoing Study and Community Engagement

The PRIME study offers clinics opportunities to participate in AI-based educational interventions.

- PRIME aims to increase colorectal cancer screening among adults aged 45-64 at federally qualified health centers.
- The program uses culturally tailored videos, text messages, male fit kits, and social needs navigation.
- The study is led by Gloria Coronado and partners with Kaiser Permanente Center for Health Research.



- The project is in the scaling-up phase, recruiting 20+ health centers to adopt educational videos and AI tools.
- Clinics will receive a one-on-one session with Navitar Health's David Perdue and participate in collaborative Zoom calls (September-November).
- The final qualitative evaluation will take place from November 2026 to February 2027.
- Interested clinics are encouraged to complete an intake form via QR code or email link.
- The initiative includes sharing success stories, resources, and future plans for developing educational videos for breast and cervical cancer screening, including self-sampling options.
- Future efforts may include interactive avatars that can answer patient questions to enhance engagement.

Patient Reminder Message Templates

Based on the evidence and best practices discussed in the webinar, here are some effective patient reminder message templates. Reminders are most effective when they are:

- **Personalized**(tailored to language, prior screening history, and patient demographics)
- **Clear and actionable**(providing specific instructions or next steps)
- **Multimodal**(delivered via text, phone, letter, or email)
- **Supportive and encouraging**(using positive, empathetic language)
- **Culturally relevant**(where possible, tailored to the patient's background)

Below are ready-to-use templates for different reminder modalities (text message, phone call, letter/email) and for different cancer screenings (colorectal, cervical, and breast), based on the strategies and examples described in the webinar:

1. **Text Message Reminder (Colorectal Cancer Screening)**
"Hello [Patient Name], this is [Clinic Name]. You are due for your colorectal cancer screening. Early detection saves lives! If you have received a FIT kit, please complete and mail it back. Need help or have questions? Call us at [Clinic Phone Number]."
2. **Text Message Reminder (Cervical Cancer Screening)**
"Hi [Patient Name], this is a reminder from [Clinic Name]: It's time for your cervical cancer screening. Please call [Clinic Phone Number] to schedule your appointment. Your health matters!"
3. **Text Message Reminder (Breast Cancer Screening)**
"Hello [Patient Name], you are due for your mammogram. Early screening can save lives. Call [Clinic Name] at [Clinic Phone Number] to book your appointment."
4. **Phone Call Script (Colorectal Cancer Screening)**
"Hello, this is [Staff Name] from [Clinic Name]. I'm calling to remind you that you are due for your colorectal cancer screening. We can mail you a FIT kit or help you schedule a colonoscopy if you prefer. Would you like us to send you a kit or help you make an appointment? If you have any questions, I'm here to help."
5. **Phone Call Script (Cervical Cancer Screening)**
"Hi, this is [Staff Name] from [Clinic Name]. We noticed you are due for your cervical cancer screening. Would you like to schedule an appointment, or do you have any questions about the process?"



6. **Letter/Email Reminder (Colorectal Cancer Screening)**

"Dear [Patient Name],

Our records show that you are due for colorectal cancer screening. Screening can prevent cancer or detect it early when it is most treatable. If you have received a FIT kit, please complete and return it as soon as possible. If you need a kit or want to discuss other screening options, please contact us at [Clinic Phone Number] or reply to this email. We are here to support your health!

7. **Letter/Email Reminder (Cervical Cancer Screening)**

"Dear [Patient Name],

This is a friendly reminder from [Clinic Name] that you are due for your cervical cancer screening. Regular screening is important for your health. Please call us at [Clinic Phone Number] to schedule your appointment. If you have questions or need assistance, we are happy to help."

8. **Letter/Email Reminder (Breast Cancer Screening)**

"Dear [Patient Name],

You are due for your breast cancer screening (mammogram). Early detection is key to successful treatment. Please contact [Clinic Name] at [Clinic Phone Number] to schedule your screening. We look forward to supporting your health."

Additional Tips

- **Personalize messages** with the patient's name and preferred language.
- **Combine reminders with** educational content or links to videos, especially for populations with lower screening rates.
- **Offer support**(e.g., transportation, help with scheduling) in the message if possible.
- **Use "I" statements** in letters for a more personal touch (e.g., "I would like you to get screened").
- **Tailor the** modality and content to the patient's preferences and history for the best results.

These templates can be adapted for the clinic's needs and patient population, following the best practices outlined in the Summary of Innovations.



Key Resources

1. **The Community Guide – Client Reminders**

- **Source:** Centers for Disease Control and Prevention, Community Preventive Services Task Force
- **Description:** Provides evidence-based recommendations for using client reminders (letters, postcards, phone calls, emails) to increase cancer screening rates.

2. **The Guide to Community Preventive Services – Provider Reminders and Recall Systems**

- **Source:** Centers for Disease Control and Prevention, Community Preventive Services Task Force
- **Description:** Summarizes evidence and recommendations for provider reminder and recall systems to improve cancer screening uptake.

3. **The National Cancer Institute (NCI) – Evidence-Based Cancer Control Programs (EBCCP)**

- **Source:** National Cancer Institute
- **Description:** Database of tested interventions, including those focused on client and provider reminders for cancer screening.

4. **Health IT Playbook: Clinical Decision Support**

- **Source:** Office of the National Coordinator for Health IT (ONC)
- **Description:** Comprehensive guide on integrating clinical decision support (including reminders and alerts) into EHRs.

Since 1988, National Association of Chronic Disease Directors and its more than 7,000 Members have worked to strengthen state-based leadership and expertise for chronic disease prevention and control in all states, territories, and nationally. [Learn more at chronicdisease.org](http://chronicdisease.org).

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