

# Mailed FIT Program

Colorectal Cancer Screening with Mailed Fecal Immunochemical Test (FIT)



## Summary of Mailed FIT Process

### Step 1: Population Selection

Data analyst uses inclusion and exclusion criteria to determine population due for CRC screening. Clinics can use Health Care Effectiveness Data and Information Set (HEDIS) criteria.


#### Inclusion:

- VSSC "ACT Now" Average Risk (i.e., age 45-75 and no prior high-risk findings on colonoscopy)
- Vital Status: Veteran is alive

#### Exclusion:

- No assigned PCP
- Limited life expectancy
- High CAN score
- Hospice
- Life-limiting comorbidities
- Certain medications


 **Core Component:** Population to receive Mailed FIT program.


 **Adaptations:** Enrolled in Primary Care, prior screening history, adults who opt in from phone or email outreach.

Pull cohort from national dashboard using inclusion and exclusion filters.

### Step 2: Advanced Notifications

Advanced notifications (primers) are delivered each round to inform Veterans of incoming mailed FIT. Primers explain purpose and provide instructions. Veterans can opt out or inform that they have already received a colonoscopy or screening.

 **Core Component:** Introductory outreach.

 **Adaptations:** Introductory letters, live or automated phone calls, text messages, and emails.


### Step 3: Mail FIT Kits

Finalize Veteran mailing list and deliver list to organization tasked with mailing FIT kit, such as Government Publishing Office (GPO). Send encrypted email with Veteran list and custom labels. Mailing to Veteran should include FIT, instructions, and pre-paid return envelope. To secure GPO services to assemble and mail kits, use Standard Form 1 (SF1).

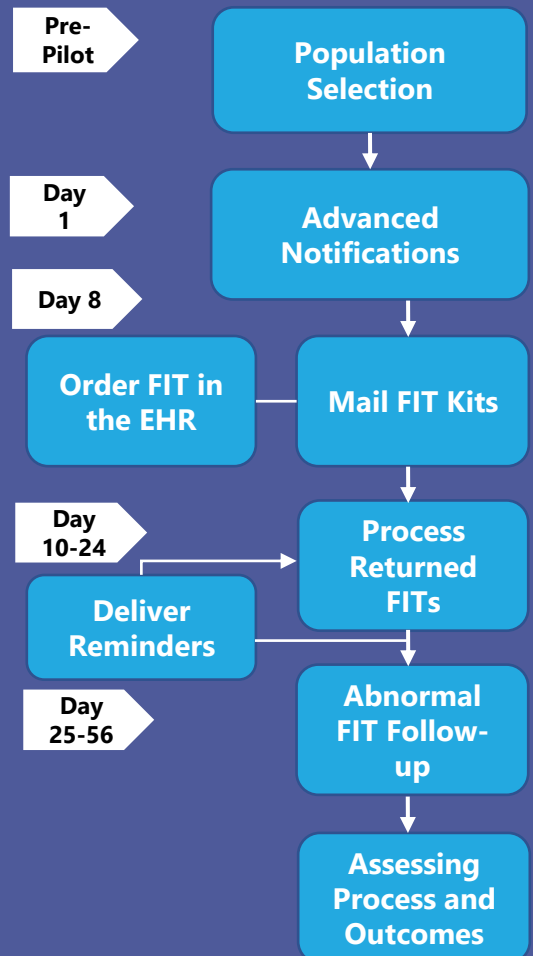
### Step 4: Order FIT in the EHR

Orders are placed in the Electronic Health Record (EHR).

 **Core Component:** Orders for FIT are placed.

 **Adaptations:** Mass/batch ordering FIT kits in Vista, Special packing, highlight sample collection date on packaging, FIT kit insert.

## HOW IT WORKS



## FIT Sample Label

Name: JONES, SALLY  
Last 4 SSN: 5678  
DoB: 7/4/1984  
Date of Collection:  
LR#: 45678912

**Note:** patient information is fabricated.



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### Step 5: Deliver Reminders

Reminders are sent to Veterans who have not returned a FIT Kit within two-three weeks after mailing.

- Core Component:** FIT reminders.
- Adaptations:** live or automated phone calls, robocall reminder systems such as AudioCare, VEText, and My HealtheVet, text messages, letters/postcards, and secure emails.

### Step 6: Process Returned FITs

Veterans mail their kits using the prepaid envelope to their VA facility to be processed by a VA lab.

- Core Component:** Process Kits.
- Adaptations:** Veterans mail kits to a VA lab (preferred) or Veterans hand-in kits to clinic for processing if clinic has capability to deliver kit to lab in a timely manner. Note that FIT must be received with 15 days of collection!

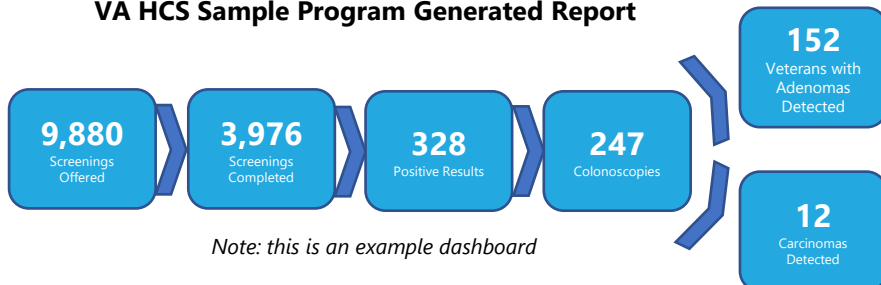
### Step 7: Abnormal FIT Follow-up

- Core Component:** Follow-up to abnormal FIT results.
- Adaptations:** Education, abnormal FIT registry tracker, direct referral to colonoscopy, provider reminders, replace pre-procedure visit with phone call, patient navigation.

### Step 8: Assessing Process and Outcomes

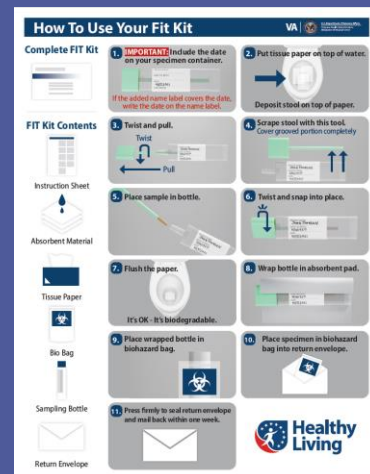
Use data dashboard to monitor key process outputs and outcomes. Largest barrier for follow-up is for patients who test positive, but it is discovered they had a recent community colonoscopy with no abnormal findings. It is recommended to hold a conversation with Veteran and clinician about risks and benefits of another colonoscopy.

VA HCS Sample Program Generated Report

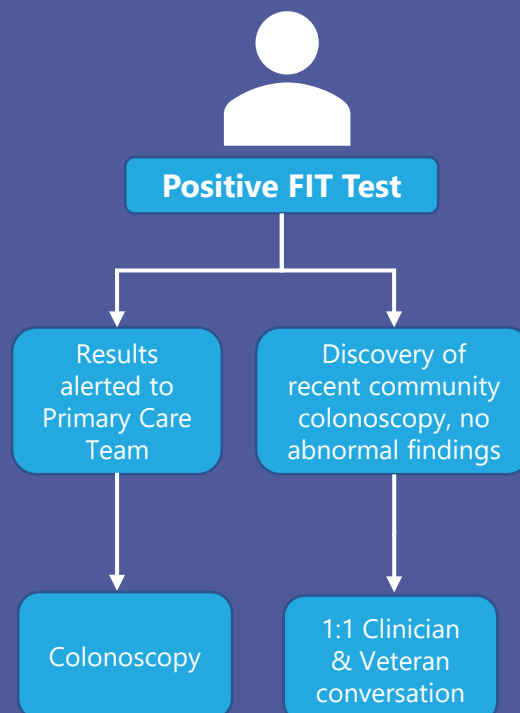


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## FIT Sample Instructions



## Positive FIT Analysis



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## Strategies for Mailed FIT

### Current State

Mailed FIT is currently implemented in four sites and has shifted to a VISN-wide program with a memorandum issued to all VISNs on December 20, 2022. Network Directors must start implementation of mailed FIT program in two or more facilities per VISN within 12 months of memo release.

VISN Mailed FIT Program must include components as outlined in the memorandum. Mailed FIT programs are encouraged to participate in ongoing quality improvement efforts to boost screening participation and share lessons learned with the National Colorectal Cancer Screening Program (NCSP) and other facilities and VISNs.

### Ways to Strengthen Your Program

#### Regional Analysis of Samples

- Some VA facilities have purchased high-throughput analyzers that can analyze 240 samples per hour from multiple healthcare systems in a single lab. While this is only capable through LEDI, the Mailed FIT team is working towards a solution.

#### Cohort by Birth Month

- After working through the initial backlog of Veterans, Mailed FIT will move to sustainment model based on birth month.

#### Marketing & Mass Outreach

- The Mailed FIT Team is working with Public Affairs, Veteran Experience, and Health Promotion/Disease Prevention (HPDP) teams to develop marketing materials.

#### Monitoring & Evaluation

- We hope to finalize a monitoring and evaluation plan that will track both quantitative data and qualitative metrics such as Veteran satisfaction.

#### Interpersonal Intervention

- Work with HPDP, Primary Care, and other stakeholders to find ways to incorporate more interpersonal interventions within this population-based approach.

## Current Sites

- CA: Fresno VA Medical Center
- CA: San Francisco VA Medical Center
- NV: North Las Vegas VA Medical Center
- WA: VA Puget Sound Health Care System



## More Information

A Mailed FIT Implementation Guide is available on the VA GI & Hepatology SharePoint.



[Visit the VA GI & Hepatology Program Office SharePoint](#)

- Implementation Guide
- Example Primers
- Additional Resources

### [Visit Diffusion Marketplace](#)

- [Marketplace.va.gov/innovations/colorectal-cancer-screening-with-programmatic-mailed-fit](https://marketplace.va.gov/innovations/colorectal-cancer-screening-with-programmatic-mailed-fit)

### Questions?

- Email [MailedFIT@va.gov](mailto:MailedFIT@va.gov)



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