LungSMART Utah: Population Health Management Approaches to Increase Lung Cancer Screening in Community Health Centers

David W. Wetter, PhD, MS
Jon M. and Karen Huntsman Presidential Professor
Director, Center for HOPE
Senior Director, Huntsman Cancer Institute
Director, Community and Stakeholder Engagement for the Clinical and Translational Sciences Institute
University of Utah and Huntsman Cancer Institute

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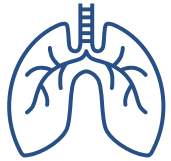
Objective

- To increase the reach and uptake of USPSTF-recommended lung cancer screening (LCS) at scale among patients in Community Health Centers

We will test strategies to:

Assess LCS eligibility via digital tools

Offer access to, and facilitate, Shared Decision Making (SDM)



Enhance LCS completion

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Study Population and Setting

- Study population
  - All patients aged 50 to 80 years who are smokers or former smokers and who had a visit to a participating community health center in the previous 3 years

- Study setting
  - ~9-14 community health center systems with approximately 40-60 primary care clinics in Utah

Sequential Multiple Assignment Randomized Trial (SMART) With 2 Phases

Phase 1

Patient Identification

Azara population health management platform is used to **identify current and former smokers, aged 50-80.**

Randomization 1

All participants receive texts and are **randomized** to receive chatbot and/or the Go2 Video in a **2X2 factorial design**

	No Chatbot	Chatbot
No Video	TM+	TM+ Chatbot
Video	TM+ Video	TM+ Chatbot Video

Eligibility Screening

Participants complete a 2-item screener via text. Individuals found likely eligible are proactively contacted and connected to the Centralized Hub.

Centralized Hub

Participants are **assessed for comorbidities/risk factors** and receive personalized **SDM** detailing the risks and benefits of LCS.

Referrals made for participants interested in screening.

Phase 2

Randomization 2

All participants who agree to LCS **receive messages through chatbot and** are **randomized to receive either reactive or proactive patient navigation** to help them complete the screening.

- Chatbot RPN
- Chatbot PPN

Completed LCS

LCS is completed and the order is closed.

If a patient is found to have cancer, we will refer them to treatment.

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Outcomes

Phase 1:

- Completed eligibility assessments for lung cancer screening among randomized patients
- Completed SDM among patients initially eligible for LCS

Phase 2:

- Completed LCS among patients randomized in phase 2

Partners

Utah Community Health Centers operate ~50 primary care clinics and serve > 161,000 individuals

Multiple Population Groups
- 52% Hispanic/Latino Ethnicity
- 8% American Indian/Alaska Native
- 40% Best served in a language other than English

Low Socioeconomic Status
- 55% < Federal Poverty Level
- 43% Uninsured

Rural/Frontier
- 41% of clinics in rural/frontier areas (RUCC ≥4)

CENTER FOR **HOPE**
HEALTH OUTCOMES & POPULATION EQUITY

AUCH
ASSOCIATION FOR UTAH COMMUNITY HEALTH

14
Community Health Centers

Utah Department of Health & Human Services

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