

MCO Letterhead

Date

Patient name
Address 1
City State Zip

Dear [Patient's name]:

Our goal at [ABQ Health Partners *or* Henry Ford Health System] is to provide the best health care possible. To help us meet this goal, we are sending you some information about colon cancer. We are sending you this information because you have scheduled you ~~have scheduled a health maintenance exam~~ *an office visit with your doctor.*

The information describes colon cancer and the different medical tests that are used to check for early signs of colon cancer. Colon cancer is the third most common cancer in the United States. It is the second leading cause of cancer death in the United States. Your chances of getting colon cancer in your lifetime are about 1 in 17. The good news is that you can get tested early and colorectal cancer can often be prevented.

The colon cancer information we are sending includes:

- ~~A Fact Sheet~~ that describes colon cancer and the different tests for colon cancer;
- ~~Frequently Asked Questions~~ about the different tests for colon cancer;
- ~~A Checklist for completing one of the colon cancer tests, and~~
- ~~A Reminder Card~~ to help you remember any questions or issues you would like to ~~talk to me about~~ *to talk about with your doctor.*

Please read this information carefully. When you ~~come in~~ *go to your appointment*, ~~we can talk about this~~ *you can discuss it with your physician* and see what's right for you. Even if you have had a colon cancer test before, please read this information. It might be time for you to have another colon cancer test.

Sincerely,

~~[Patient Primary Care Physician]~~ *[Physician Leader/Other]*

Revised and Marked Baseline Patient Survey-First Mailing (HFHS)

~~MCO Letterhead~~HFHS letterhead

Date

Patient name

Address 1

City State Zip

Dear [Patient's name]:

*As a Henry Ford patient and a member of Health Alliance Plan, you are being asked to fill out a survey to find out what people think about colon cancer screening. ~~Your doctor works in a clinic that is in this research study. The Centers for Disease Control and Prevention are funding this study.~~ Your responses ~~opinions~~ are very important to us. This survey will take about ~~30 minutes~~ 20 minutes to complete. **We have enclosed \$10 as reimbursement for your time and effort.***

Henry Ford Hospital and Medical Centers works to give patients the best health care possible and you taking part in this study will help us do this. ~~We are doing this survey to help the CDC find out what people think about colon cancer tests. The information from this survey will help the CDC and [MCO] to find out why people get tested, and to improve materials about colon cancer testing for doctors to use with patients.~~ The Centers for Disease Control and Prevention, Battelle Center for Public Health Research, and Henry Ford are working together on this study to find out how people feel about colon cancer screening and your experiences talking with your doctor about it. To participate, all you need to do is complete the enclosed survey. Your responses will be private and will be combined with answers from other people. Please do not put your name on the survey. We will not identify any person who was in the study in any papers or reports. None of your responses will be shown to your doctor.

Your participation in this research study is voluntary. ~~Some questions ask about colon cancer tests you might have had. We would also like to know how you feel about talking to your doctor about these things.~~ Your returning this survey lets us know that you have agreed to participate. You are free to choose to complete this survey or not. You may be uncomfortable answering some of the questions. You may refuse to answer any of the questions. If you do not want to complete the survey, it will not change the care you get at Henry Ford or your coverage *through HAP.* ~~]. The information from this survey will help the CDC to find out why people do or do not have colon cancer tests~~

You may be contacted by mail one more time in the future so that we can learn more about the opinions and experiences you've had talking with your doctor about colon cancer screening. However, taking part in this survey does not mean that you have to take part in future surveys.

Please send your completed survey to Battelle. Please use the stamped and addressed envelope provided *to return your survey.* **If you have any questions about this research study, please call** ~~[Battelle contact]~~ at Battelle, at (206) 528-xxxx or ~~[MCO contact]~~ at ~~[MCO]~~.

at ~~(xxx) xxx-xxxx~~ **Deirdre Shires at (313) 874-6248**. If you have questions about your rights as a research subject, you may ~~Battelle's human subjects supervisor, Margaret Pennybacker, PhD, at 1-877-810-9530, extension 500~~ *contact the Henry Ford Health System IRB Coordinator at (313) 916-2024. The IRB is a group of people who review the research to protect your rights. If you do not want to be contacted again about this survey, please sign your name below and return this page to us within two weeks.*

~~We hope you will help us with this important study. Thank you for filling out this survey.~~

Sincerely,

*Jennifer Elston Lafata, PhD
Research Scientist
Center for Health Services Research*

~~Daniel Montañó, PhD
Research Leader
Battelle Centers for Public Health
Research and Evaluation~~

_____ *does not want to take part in this survey.*
Signature

Date

Patient name

Address 1

City State Zip

Dear [Patient's name]:

As an ABQ Health Partners patient and a member of Lovelace Health Plan, you are being asked to fill out a survey to find out what people think about colon cancer screening. Your doctor works in a clinic that is in this research study. The Centers for Disease Control and Prevention are funding this study.

*s. Your ~~responses~~ ~~opinions~~ are very important to us. This survey will take about 30 minutes 20 minutes to complete. **We have enclosed \$10 as reimbursement \$10 as a token of our appreciation for your time and effort.***

ABQ Health Partners and Lovelace Health Plan work to give patients the best health care possible and you taking part in this study will help us do this. ~~We are doing this survey to help the CDC find out what people think about colon cancer tests. The information from this survey will help the CDC and [MCO] to find out why people get tested, and to improve materials about colon cancer testing for doctors to use with patient~~ The Centers for Disease Control and Prevention, Battelle Center for Public Health Research, and Lovelace Clinic Foundation, a local research organization, are working together on this study to find out how people feel about colon cancer screening and your experiences talking with your doctor about it. The information from this survey will help the CDC to find out why people do or do not have colon cancer tests. To participate, all you need to do is complete the enclosed survey. Your responses will be private and will be combined with answers from other people. Please do not put your name on the survey. We will not identify any person who was in the study in any papers or reports. None of your responses will be shown to your doctor.

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~~We hope you will help us with this important study. Thank you for filling out this survey.~~

Sincerely,
April L. Salisbury
Study Coordinator
Lovelace Clinic Foundation

~~Daniel Montañó, PhD
Research Leader
Battelle Centers for Public Health
Research and Evaluation~~

Revised and Marked Baseline Patient Survey-Second Mailing (HFHS)

~~MCO Letterhead~~ *HFHS Letterhead*

Date

Patient name

Address 1

City State Zip

Dear [Patient's name]:

Last month we asked you to fill out a survey about colon cancer screening. *We also sent you \$10 as reimbursement for your time and effort.* Our records show that you have not yet *completed the survey.* If you have already filled out the survey and sent it to us, thank you. *If you have not filled out the survey and you would still like to,* please do so now. *This survey will take about 20 minutes to complete. We are very interested in your opinions.* ~~We also sent a reminder postcard to you.~~

The Centers for Disease Control and Prevention, Battelle Center for Public Health Research, and Henry Ford are working together on this study to find out how people feel about colon cancer screening and your experiences talking with your doctor about it. ~~We are doing this survey to help the CDC find out what people think about colon cancer tests. The information from this survey will help the CDC and [MCO] to find out why people get tested, and to improve materials about colon cancer testing for doctors to use with patients~~ *To participate, all you need to do is complete the enclosed survey.* Your responses will be private and will be combined with answers from other people. Please do not put your name on the survey. We will not identify any person who was in the study in any papers or reports. None of your responses will be shown to your doctor.

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You may be contacted by mail one more time in the future so that we can learn more about the opinions and experiences you've had talking with your doctor about colon cancer screening. However, taking part in this survey does not mean that you have to take part in future surveys.

We have included another copy of the survey in case you need it. Please use the stamped and addressed envelope provided to return your survey. **If you have any questions about this research study, please** ~~[Battelle contact] at Battelle, at (206) 528-xxxx or [MCO contact] at [MCO], at (xxx) xxx-xxxx~~ **call Deirdre Shires at (313) 874-6248.** If you have questions about your rights as a research subject, ~~Battelle's human subjects supervisor,~~

~~Margaret Pennybacker, PhD, at 1-877-810-9530, extension 500 you may contact the Henry Ford Health System IRB Coordinator at (313) 916-2024. The IRB is a group of people who review the research to protect your rights. If you do not want to be contacted again about this survey, please sign your name below and return this page to us within two weeks.~~

~~We hope you will help us with this important study. Thank you for filling out this survey.~~

Sincerely,

*Jennifer Elston Lafata, PhD
Research Scientist
Center for Health Services Research*

~~Daniel Montañó, PhD
Research Leader
Battelle Centers for Public Health
Research and Evaluation~~

_____ *does not want to take part in this survey.*
Signature

Revised and Marked Baseline Patient Survey-Second Mailing (ABQ HP/Lovelace)
MCO Letterhead ABQ HP Letterhead

Date

Patient name

Address 1

City State Zip

Dear [Patient's name]:

Last month we asked you to fill out a survey about colon cancer screening. *We also sent you \$10 as a token of our appreciation for your time and effort.* Our records show that you have not yet *completed the survey.* If you have already filled out the survey and sent it to us, thank you. *If you have not filled out the survey and you would still like to, please do so now. This survey will take about 20 minutes to complete. We are very interested in your opinions.* ~~We also sent a reminder postcard to you.~~

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~~We hope you will help us with this important study. Thank you for filling out this survey.~~

Sincerely,
April L. Salisbury
Study Coordinator
Lovelace Clinic Foundation
Sincerely,

Daniel Montaña, PhD
Research Leader
Battelle Centers for Public Health
Research and Evaluation

Revised Baseline Patient Survey-Third Mailing (HFHS)

~~MCO Letterhead~~ HFHS Letterhead

Date

Patient name

Address 1

City State Zip

Dear [Patient's name]:

~~Recently we asked you to fill out a survey for a research study being conducted by the Centers for Disease Control and Prevention (CDC), [MCO], and Battelle Centers for Public Health Research to find out more about colon cancer testing screening. We also sent you \$10 as reimbursement for your time and important responses and effort. You were sent two letters and a reminder postcard about the survey. Our records show that you have not sent in your completed survey yet completed the survey. If you have already filled out it out and sent it in the survey and sent it to us, thank you. If you have decided to participate but have been too busy to fill out the survey, could you please do so now?~~

If you have not filled out the survey and you would still like to, please do so now. This survey will take about 20 minutes to complete. We are very interested in your opinions.

~~The Centers for Disease Control and Prevention, Battelle Center for Public Health Research, and Henry Ford are working together on this study to find out how people feel about colon cancer screening and your experiences talking with your doctor about it. We are doing this survey to help the CDC find out what people think about colon cancer tests. By filling out this survey you will help us find out why people get tested, and help the CDC to improve materials about colon cancer testing for doctors to use with patients. To participate, all you need to do is complete the enclosed survey. Your responses will be private and will be combined with answers from other people. Please do not put your name on the survey. We will not identify any person who was in the study in any papers or reports. None of your responses will be shown to your doctor.~~

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