Women's & Men's Health
Nebraska Colon Cancer Screening Program
Community Health Hub Data Entry of FIT for Med-It

OVERVIEW:

Nebraska Colon Cancer Screening Program (NCP) is a colon cancer-screening program that offers enrollment, screening and education to Nebraska men and women who are 45-74 years of age. Tests and services may include fecal immunochemical test (FIT) kit for at home testing, colonoscopy and information about healthy living. All screening tests are based upon personal and family history.

NCP utilizes Community Health Hubs (CHH) in order to elevate capacity across Nebraska by increasing the number of women and men 45-74 who are appropriately screened for colon cancer in all populations. CHH also sends out FIT kits to eligible community clients.

Requirements for CHH:
- Implement community based FIT screening during the year.
- Must have an approved FIT Distribution Plan submitted and signed off on by NCP team member from DHHS.
- Must use an approved FIT Request Form signed off on by NCP team member from DHHS.
- Must use the FIT statewide registry, Med-It, for tracking non-returned and **positive tests** and provide aggregate data. FIT Request Forms must be entered into the registry within **five days** of kit distribution and data entry must follow NCP data entry procedures.
- FIT kits should only be distributed to women and men 45-74 who are Nebraska residents only, have no insurance and meet income guidelines.
- NCP will provide FIT kits and processing to contracted laboratory.

HOW TO LOGIN TO MED-IT:

You will need to complete a new Med-It User Profile Form and/or update your profile every fiscal year. This form can be found on the Women's and Men's Health website at: https://dhhs.ne.gov/Documents/Med-It%20User%20Profile.pdf

To access Med-It type in: med-itweb.com (will not work in Explorer).

| STEP 1:	STEP 2:
To log in: Enter User Name CDC Program code: CC Click on: Sign In	Enter your Password Select Login
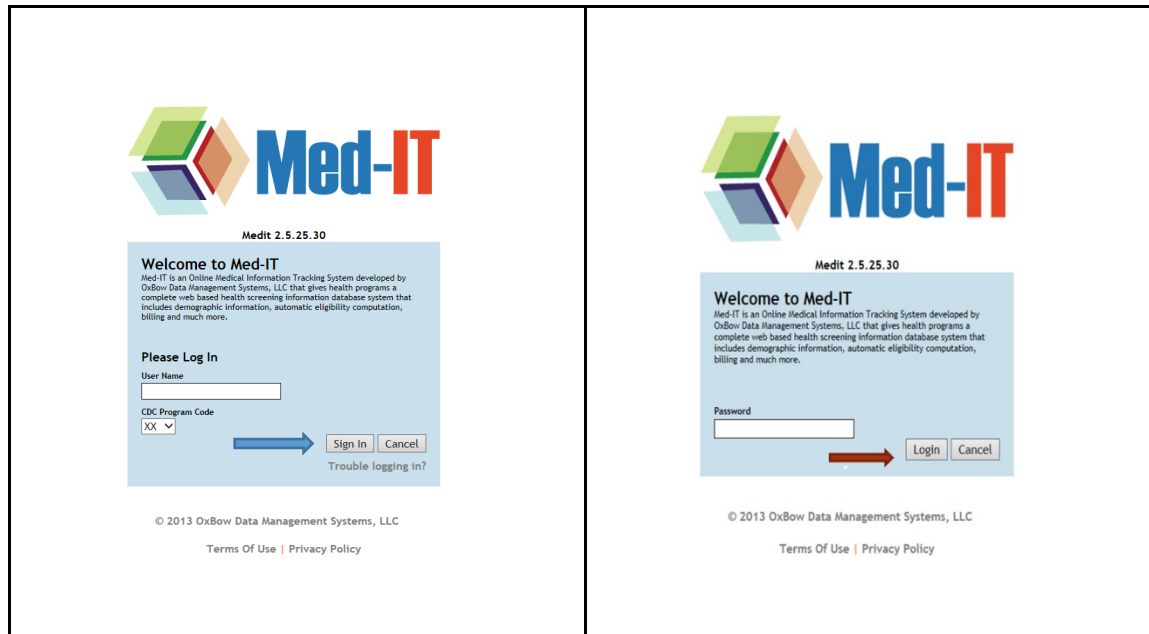
The next two screens you see are online service agreement and terms of use information. Please review and proceed through each time you enter into Med-It.

Click 'Proceed" to continue.
You will have to click 'Proceed' two times

You are now logged into the Med-It
Database Management System.
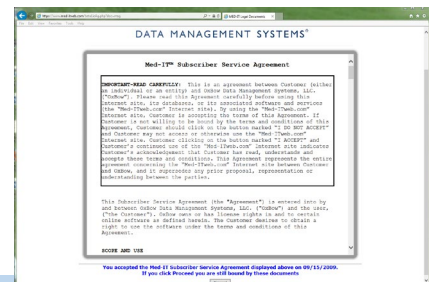
HOW TO SEARCH FOR CLIENTS:

Changing your Med-It screen to search by Name/DOB/Zip code

- Search client by DOB – Date of Birth
    - Change your search screen in Med-It to come up showing clients name and date of birth
        1. Click the drop down on the right hand side of screen next to 'Logged In As'
        2. Click on your login name
        3. Under 'Default Search Criteria:' click on 'Search by Name/DOB/Zip Code
        4. Then click 'Submit' at bottom. Your client searches will now always come up looking for DOB and Name

jcranecc's Profile

Password:	Change Password
# of recent clients:	05
Default Search Criteria:	○ Search By ID(s)/[3]rs
	● Search By Name/DOB/Zip Code
Theme:	Gray Theme

First Question:	What is the name of your birth city?
Answer:	*******
Second Question:	Who is your favorite cousin?
Answer:	*****
Third Question:	Who is you[4]riend?

NOTE: Some changes require re-[...]ke effect

Submit

Your screen will now always come up with the Search asking for Name/DOB/Zip Code

Search Clients

☐ Search By ID(s)/Numbers

☑ Search By Name/DOB/Zip Code

DOB:	
Last Name:	
First Name:	
Address:	
Zip Code:	
Include Pending Clients:	☐

Search

If there is a **Green/White label** on the FIT kit they are a CHH client.
Search by   FIT # under the Search by ID(s)/Numbers (it will say FOBT#)

-Or-

Date of Birth
Client Name
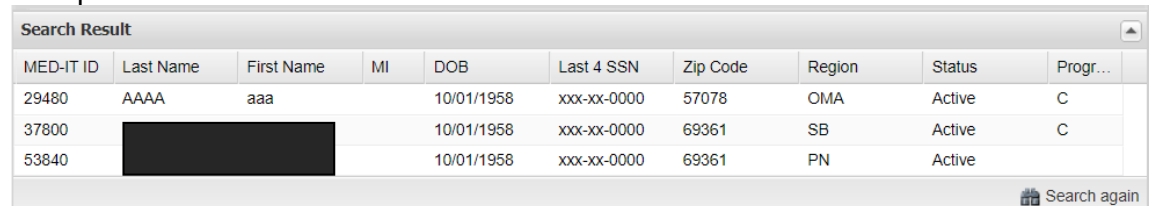On the Search by Name/DOB/Zip Code section.

SECTION 1
Determining if Client is a New or Existing Client
Enter Clients DOB – Date of Birth then click on search

Check the Search Results that come up to see if your client is in this list. If the client is in this list, they are an existing client and you want to skip to Section 3. If the client is not in this list then proceed to Section 2

MED-IT ID	Last Name	First Name	MI	DOB	Last 4 SSN	Zip Code	Region	Status	Progr…
29480	AAAA	aaa		10/01/1958	xxx-xx-0000	57078	OMA	Active	C
37800	████████████			10/01/1958	xxx-xx-0000	69361	SB	Active	C
53840	████████████			10/01/1958	xxx-xx-0000	69361	PN	Active	

- If client is not in the system by the time the lab goes to process kit:
  - A representative of NCP to make sure kit is entered immediately will contact your hub.
  - CHH will be notified that the client is not in the system or there is not a cycle started for the current year.

SECTION 2
Entering New Client into Med-It
GO TO
- Client Info – Top of the screening on the left
- Add New Client* - CC or Add New Client – CRC Have call into Oxbow for clarification
  - Enter the following:
    1. Clients Name (Last and First names)
    2. SSN if provided
    3. Date of Birth – Clients must be 45-74 years of age to be eligible if younger or older do not enter

At this point the computer will may pop up saying possible duplicate client please check the information listed against the enrollment form.
1. If this is not a duplicate client, click on the [X] and continue with enrollment.
2. If this is a duplicate client click on the client under 'Possible Duplicates' and this will automatically take you to the existing client where you can then Skip to Section 3. It will not save the data you just entered.

Cancer Coalition Client Information   [?] [H]

Personal Information

Name: aaaa   aaa   [Last name, First name, MI]

Maid Nam

Date of Birt

Not

1

Found possible duplicate clients   [X]

Your Client

First Name	Last Name	DOB	SSN
aaa	aaaa	10/01/1958	

Possible Duplicates

2

ID	First Name	Last Name	DOB	SSN
29480	aaa	AAAA	10/01/1958	000-00-0000

Release N

Vie

Screening

#	Date

N/A

Due Dates

4   Enter Gender

5   Enter Clients Address – the zip code will automatically populate State, County, and City

6   Enter clients phone number

7   If alternate contact was given click the box by Alternate Contact then enter information

8   Hispanic: Click on Yes or No or Unknown

9   Enter Race – Click on clients Race if known

10   Date Enrolled – This is the date of the clients 1st enrollment

11   Region: Choose from Drop Down

12   Status: Active

13   As of: this is the date client is enrolling. If this is the clients 1st enrollment, it will be the same date as the Date Enrolled.

14   Learned of Program: Choose from Drop Down
   - If you do not see your Current Distribution list Contact

15   Income: Skip

16   Income Frequency: Skip

17   Medical release form signed and dated: mark Yes

18   Date Signed.
   - The client must mark Yes on enrollment form with a date of signature

19   Insurance: Skip

20   Click on UPDATE. If you do not click Update, your information will not be saved.

21   Go to Section 4

SECTION 3

Updating Existing Client Information into Med-It

- After searching and determining client is an Existing Client Update the following information by sending to Aaron.Sweazy@nebraska.gov where he will update the records (1, 2 and 3) and confirm they are changed.   Once confirmed of changes in client information by Aaron, you may proceed with part 4-9 below:

1. Last Name – If client's last name changed, you may update this information as long as you are sure you have the correct client.
2. Address – If new address
3. Telephone numbers – If new numbers
4. Enrollment Information
   - Date Enrolled: Do NOT change this date. This date will always be client's initial enrollment date.
   - Change the As of: to date signed new enrollment
5. Learned of Program – Choose from drop down
6. Medical release form signed and date: Yes
7. Date Signed: **Change to date signed new enrollment**
8. Click on UPDATE. If you do not click Update, your information will not be saved.
9. Go to Section 4

SECTION 4

Go to CRC Data – Health Evaluation

1. Add New Screening
2. Cycle linkage: New CRC Cycle from drop down
3. Assessment/Exam Date: (date kit handed to client)
4. Date Received: Input same date as Assessment Exam Date from above
5. Doctor from drop down
6. Clinician (select one if known)
7. Preferred Health System (leave blank)
8. Screening History: If new client put YES (and when), if not then put NO
9. Initial Recommendation:
   a. Test: Make sure Recommended says Take-Home FIT
   b. Enter Kit number in blank (notice it will say FOBT Number, it is ok as long as FIT was selected in Recommended Test drop down like pic below).
   c.

   d. Indication: Screening
   e. Brought in for cycle (optional…fill in if known)
   f. Enter Date kit distributed
   g. Click SUBMIT

CHH Clients

LABELING:

- **CHH** required to label and number FIT kits prior to distribution.

- Kits numbered with each **CHH** two-letter code followed by 23 (for 2023 distribution, etc.) and then a number with the option to add a unique code for distribution site. (EXAMPLE: NC23-1, NC23-2, etc.) Kit numbers should be entered exactly as they are written on the form (with or without spaces between the code and numbers).

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Region	Code	Region	Code
Omaha	OMA	Three Rivers	3RV
Lancaster	LAN	Scottsbluff	SB
Panhandle	PN	South Heartland	SH
Public Health Solutions	PH	North Central	NC
Four Corners	FC	East Central	EC
Elkhorn Logan Valley	EL	Loup Basin	LB
Sandhills	SA	Central District	CD
Health Disparities	HDHE	Charles Drew	CDHC
Southwest	SW	Southeast	SE
Dakota	DC	West Central	WC
Northeast	NE	Sarpy/Cass	SC
Two Rivers	2R		

- **CHH** are to adhere to label instructions and are to make sure the FIT kit, envelope and Request Form have the same corresponding numbers.

PROCESS:

1. **CHH** labels FIT kits and distribute kits to clients
2. **Client** returns completed FIT kit to lab
3. **Lab** sends results to provider
4. **Lab** sends results to client 5 days later
5. **Lab** sends results directly to **CHH** *IF* data system says 'Fix It' for Provider
6. **Lab** faxes **NCP** at 402-471-0913 the FIT sheet if:
   - Positive results - **Client** receives recommended follow up from **NCP**
   - Client not in the data system or no new cycle is started

Questions: Aaron Sweazy, Health Educator || Phone: 402-471-6567
Fax: 402-471-0913 || **aaron.sweazy@nebraska.gov**