LOW-DOSE CT LUNG CANCER SCREENING



CMS UPDATED GUIDELINES

- In 2022, CMS updated guidelines for low-dose lung cancer screening. As a result of these changes, access to screenings for more at-risk individuals has increased. Adjustments were made to age and smoking history criteria.
- Less than 2% who are considered high risk for lung cancer are screened.
- Lung cancer screening can determine the risk of terminal cancer by 20%.
- SoonerQuit staff are working to increase awareness of this updated benefit to both SoonerCare providers and members.

- Lung cancer is the leading cause for cancer-related deaths.
- Lung cancer screening can help prevent deaths from lung cancer in people at high risk — mostly current and former smokers. But screening rates in Oklahoma remain very low.

- Oklahoma's five-year survival rate is now 25%, a 21% increase from 2014 to 2018, compared to the national fiveyear survival rate of 19.7%.
- 41st in the nation for rate of new lung cancer cases at 66.0 per 100,000, compared to the national rate of 56.7 per 100,000.

- 47th in the nation for early diagnosis at 22.1%. Nationally, only 25.8% of cases are diagnosed at an early stage when the survival rate is much higher.
- 45th in the nation for lung cancer screening at 2%, compared to Nationally, only 5.8% of those at high risk were screened.

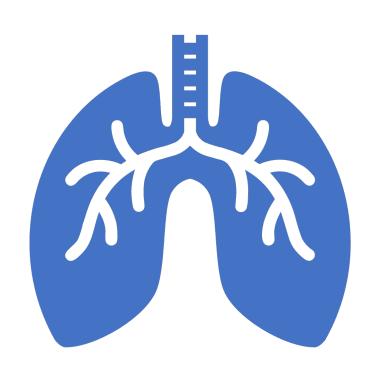
- 47th in the nation for surgery at 15.7%, compared to 20.8% nationally.
- 41st in the nation for lack of treatment at 23.4%, compared to 20.6% nationally.

ELIGIBILITY CRITERIA

CRITERIA FOR LOW-DOSE CT SCAN

- Between the ages of 50-80
- Current or former smoker with at least 20 pack-year history
- Current smoker or have quit within the past 15 years
- No history or symptoms of lung cancer

SHARED DECISION-MAKING

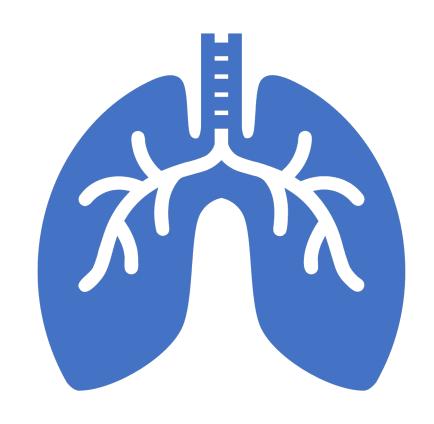


COUNSELING AND SHARED DECISION-MAKING VISIT

- Determination of eligibility
- Shared decision-making, including the use of one or more decision aids
- Counseling on the importance of adherence to annual lung cancer LDCT screening

COUNSELING AND SHARED DECISION-MAKING VISIT

- Impact of comorbidities
- Ability or willingness to undergo diagnosis and treatment
- Adherence to maintaining smoking abstinence
 - o Utilize motivational interviewing techniques



SHARED DECISION MAKING

STEPS OF SHARED DECISION-MAKING

- Step 1: Seek your patient's participation
- Step 2: Help your patient explore and compare treatment options
- Step 3: Assess your patient's values and preferences
- Step 4: Reach a decision with your patient
- Step 5: Evaluate your patient's decision

SHARED DECISION-MAKING TOOLS



- Using <u>decision support tools</u> can help in the shared decisionmaking appointment
- The SHARE approach: Achieving patient-centered care with shared decision making

BENEFITS OF SCREENING



Early detection



Reduction of mortality



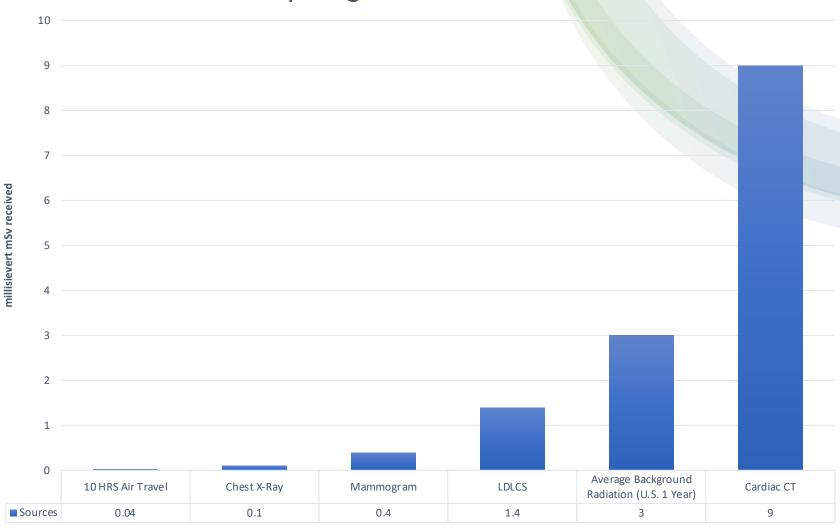
Less exposure to radiation than other forms of screening

RISKS OF SCREENING

- False positives leading to unnecessary tests and invasive procedures
- Incidental findings
- Overdiagnosis
- Short-term increase in distress due to indeterminate results
- Radiation exposure

Comparing Sources of Radiation

RECOGNIZING CONCERNS



National Academies of Sciences, Engineering, and Medicine; Division on Earth and Life Studies; Nuclear and Radiation Studies Board; Committee on Developing a Long-Term Strategy for Low-Dose Radiation Research in the United States. Leveraging Advances in Modern Science to Revitalize Low-Dose Radiation Research in the United States. Washington (DC): National Academies Press (US); 2022 Oct 20. 2, Low-Dose Radiation Exposures and Health Effects. Available from: https://www.ncbi.nlm.nih.gov/books/NBK586463/.

RATIONALE

- The 5-year relative survival for stage I disease, ranges from approximately 50%–90%
- 5-year survival for stage IV disease, ranges from approximately 3%–6%
- This data suggests that lung cancer deaths could be greatly reduced if the primary tumor is discovered and treated before it spreads

Gierada, D.S., Black, W.C., Chiles, C., Pinsky, P.F., & Yankelevitz, D.F. (2020). Low-Dose CT Screening for Lung Cancer: Evidence from 2 Decades of Study. Radiology: Imaging Cancer, 2(2), e190058. Low-Dose CT Screening for Lung Cancer: Evidence from 2 Decades of Study | Radiology: Imaging Cancer (rsna.org).

GUIDELINES CONSENSUS

- The <u>U.S. Preventive Services Task</u> <u>Force recommends LDLCS</u>
- The <u>American Cancer Society</u> supports LDLCS
- The <u>American Academy of Family Physicians</u> now supports LDLCS



RELATED BILLING CODES



G0296

Visit to determine LDCT eligibility (shared decision-making)



71271

Computed tomography, thorax, lowdose for lung cancer screening, without contrast material(s)

PA is required

Don't forget necessary modifiers

CURRENT TOBACCO USERS



CURRENT TOBACCO USERS

- Provide 5A's cessation counseling and document in the electronic medical record
 - o Ask, Advise, Assess, Assist, Arrange
- SoonerCare covers and reimburses providers for tobacco cessation counseling
 - o 3 to 10-minute sessions
 - o Greater than 10-minute sessions
 - o 3 minutes or less is considered a standard visit and not reimbursable

TOBACCO CESSATION 5As

- ASK: Do you use tobacco/smoke?
- ADVISE: In a clear and personalized manner
- ASSESS: Is the patient ready to quit?
- ASSIST: Provide necessary tools and support
- ARRANGE: Follow-up contact to support patient's quit journey

TOBACCO CESSATION

- If applicable, prescribe nicotine replacement therapy and place a referral to OK Tobacco Helpline for further cessation assistance.
- SoonerCare covers all seven FDA-approved NRT with no copay:
 - o Varenicline
 - o Bupropion
 - o Nicotrol inhaler
 - o Nicotrol nasal spray

- o Nicotine patch
- o Nicotine lozenges
- o Nicotine gum

 Research shows people are more likely to quit and stay quit with the use of NRT and a support system like the Oklahoma Tobacco Helpline.



PRESCRIBING PHARMACOTHERAPY/NRT

- SoonerCare members can receive NRT when medically appropriate (a prescription is necessary)
- Nicotine patches, gum, lozenges, nasal spray, inhalers and bupropion have no duration limit.
- Varenicline has a limit of 180 days per 12 months
- Does not count toward 6 Rx limit

RELATED BILLING CODES



99406

Tobacco cessation counseling between 3-10 minutes



99407

Tobacco cessation counseling greater than 10 minutes

^{*} Tobacco cessation counseling under 3 minutes is considered a regular visit, therefore not reimbursable

EDUCATIONAL MATERIALS

Are You a Candidate for a Life-Saving Scan?

According to the Centers for Disease Control and Prevention (CDC), 90% of all lung cancer deaths are associated with smoking. The American Cancer Society suggests yearly lung cancer screenings for those who smoke or have smoked even if you have no symptoms or history of lung cancer.

If you are a current smoker ready to quit tobacco, SoonerCare has benefits to help you be successful!

- All seven (7) FDA-approved tobacco cessation medications are covered by SoonerCare and DO NOT count against the monthly six-prescription limit.
- No copay on any of the seven (7) approved tobacco cessation medications.
- Tobacco cessation medication options available to SoonerCare Members:
 - Gum
- · Nasal Spray
- · Inhaler
- PatchesZvban
- Lozenges
- Chantix or Varenicline – 180 days

Talk to your SoonerCare provider today about the many options available to help reduce cravings.









Oklahoma.gov/ohca • MySoonerCare.org

Admin: 405-522-7300 Helpline: 800-987-7767

 U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress. A Report of the Surgeon General. Atlanta. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Choric Disease Prevention and Health Promotion, Office on Smoking and Health, 2014 (accessed 2017 Apr 20). Do you meet the criteria?

Are you between 50 and 80 years old?

YES

Are you a current tobacco smoker or have you smoked tobacco in the last 15 years?

Cigar, e-cigarettes and vape users do not currently qualify.

YES

Smoke or smoked at least a pack a day for 20 years or more?

YES

Contact your SoonerCare provider today to ask how you can take advantage of this life-saving benefit!

If you answered NO to any of the above questions, you don't meet the qualifications for this scan's criteria. Please consult with your provider if you have concerns or would like to discuss other detection options. Available soon: LDLC palm cards for your practice

 On the SoonerQuit web page is an LDLC an LDLC screening one-pager for printing

SoonerCare

Low-Dose CT Lung Cancer

SCREENING

Member Eligibility Criteria

Current tobacco user? Provide 5A cessation counseling and document in the electronic medical record.

Criteria for Low-Dose CT scan

- · Between 50 and 80 years old.
- Current or former smoker (20 cigarettes/day for at least 20 or more years).
- Former smoker who has been smoke-free for 15 years or less.
- No history/symptoms of lung cancer.



Shared Decision-Making

Using one or more decision aids, discuss benefits vs. harms of screening.

- · Follow-up diagnostic testing.
- · Over-diagnosis.
- · False positive rates.
- · Adherence to annual lung cancer LDCT screening.
- \cdot Impact of comorbidities.
- · Ability or willingness to undergo diagnosis treatment.
- · Adherence to maintaining smoking abstinence.
- If applicable, prescribe NRT and refer to OK Tobacco Helpline for further cessation assistance.

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Oklahoma Hospital Association

Addressing Lung Cancer: Expanding Access and Improving Outcomes



Oklahoma Hospital Association Foundation



Oklahoma Hospital Association Addressing Lung Cancer

01

Support tobacco prevention and cessation programs and policies

02

Increase public awareness of annual lung cancer screening with lowdose CT 03

Increase lung cancer screening capacity 04

Increase clinician performance on lung cancer screening with low-dose CT

05

Ensure that all
Oklahomans
diagnosed with lung
cancer have access to
the newest
treatments

06

Coordinate lung cancer prevention and tobacco treatment services

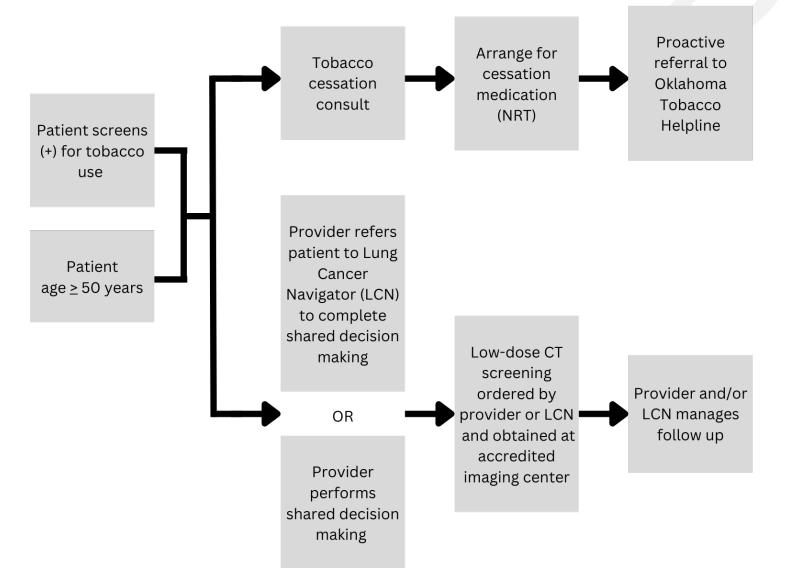
OHA Preventive Lung Cancer Efforts

- Conducted a statewide scan of hospitals to identify current lung cancer efforts and find a best practice model
- Developed comprehensive toolkit has been developed to help health systems build a preventive lung cancer screening program (including assistance with accreditation).
- Developed a <u>statewide preventive lung cancer screening map</u> to guide statewide capacity building efforts.
- Creating an <u>Oklahoma Lung Cancer Roundtable</u> focused on:
 - Early Detection
 - Risk Reduction





Tobacco Treatment and Lung Cancer Screening Workflow



THANK YOU!



Kelly Willingham
Health Improvement Specialist
kwillingham@okoha.com



HELPFUL LINKS

- Fee Schedules
- <u>SoonerQuit</u> for providers
- NRT <u>Pharmacologic Guide</u>
- For tobacco cessation counseling questions: SoonerQuit@okhca.org
- To request digital access to LDLC one pager & palm cards: <u>SoonerQuit@okhca.org</u>
- Low-dose lung cancer screening, contact: Marie.Bagwell@okhca.org

RESOURCES

- Lung cancer screening site locator tool
- American Lung Association Guide for Providers
- Shared Decision Making Checklist

<u>Lung Cancer Education Materials</u>





GET IN TOUCH

4345 N. Lincoln Blvd. Oklahoma City, OK 73105

oklahoma.gov/ohca MySoonerCare.org Agency: 405-522-7300 Helpline: 800-987-7767





