

Quality health plans & benefits
Healthier living
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Intelligent solutions



Implementation of Lung Cancer Screening Workshop, Session 6

The National Academies of Sciences, Engineering,
and Medicine

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Radiology benefits management

High-tech radiology (CT, MRI, PET, nuclear cardiology) precertification

- Applies appropriateness criteria to manage radiology utilization
- Uses evidence-based criteria
- Optimizes workup, screening, surveillance, staging and restaging radiology examinations
- Can minimize/eliminate redundant workups across the care spectrum.*
- Aetna's primary vendor is Evicore (formerly CareCore | MedSolutions)

*Easier for large commercial carriers or potentially via data aggregators like regional health information organizations.

Identification of LDCT screening encounters

Current Procedural Terminology (CPT) code from AMA:

- 71250 CT chest without contrast (includes LDCT)

Exclude:

- 71260 CT chest with contrast
- 71270 CT chest with and without contrast

Health Care Common Procedure Coding System (HCPCS) codes from CMS:

- S8032 Low-dose CT for lung cancer screening
- G0297 Low-dose CT scan (**LDCT**) for lung cancer screening

Effective February 2015, these must be billed with **ICD-10 diagnosis code**:

- Z87.891 Personal history of tobacco use/personal history of nicotine dependence

www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R3018CP.pdf

www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/mm9246.pdf

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Precertification: non-Medicare Advantage

Under Evicore guidelines, non-Medicare Advantage patients must meet all of the following requirements:

- Age 55-80
- 30-pack per year history of smoking
- Currently smokes or quit smoking less than 15 years ago*
- No low-dose CT lung screening in past 12 months

*Screenings should end once the patient hasn't smoked in 15 or more years.

USPSTF Grade B, recommendation. Release date December 2013

www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/lung-cancer-screening

Aetna Clinical Policy Bulletin 0380 last revised Mar 14, 2016

www.aetna.com/cpb/medical/data/300_399/0380.html

Precertification: Medicare Advantage

Under Evicore guidelines, Medicare Advantage patients must meet all of the following requirements:

- Age 55-77
- 30-pack per year history of smoking
- Currently smokes or quit smoking less than 15 years ago*
- No low-dose CT lung screening in past 12 months
- No signs or symptoms of lung cancer

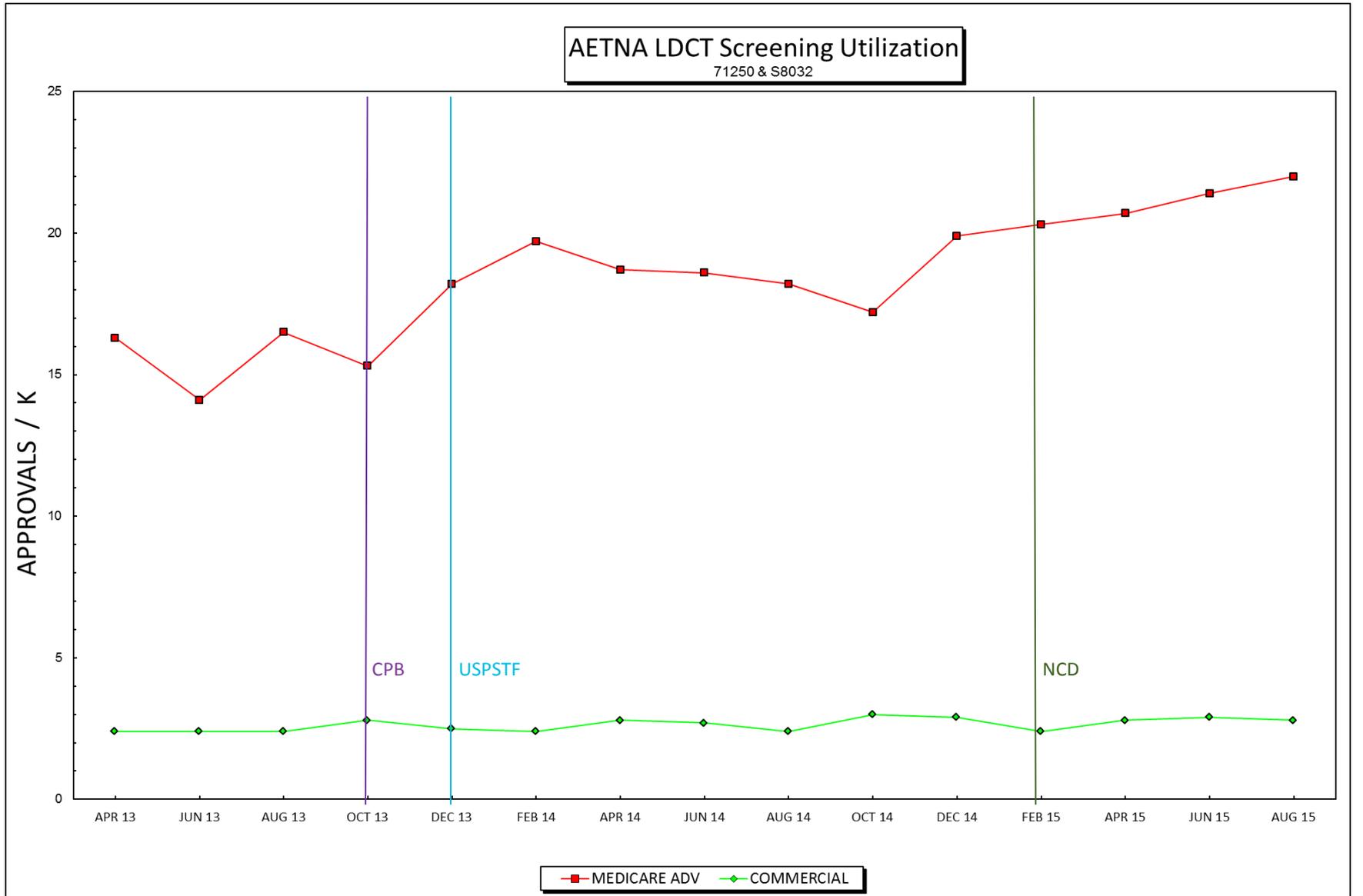
For the initial low-dose CT lung cancer screening, the patient must have a written order from a provider and taken part in shared decision making (including counseling regarding lung cancer screening).

For subsequent low-dose CT lung cancer screenings, the patient must have a written order from a provider.

*Screenings should end once the patient hasn't smoked in 15 or more years.

NCD Decision Memo for Screening for Lung Cancer with Low Dose computed Tomography (LDCT) (CAG-00439N)
www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?NCAId=274.

Our experience using claims data



Our perspective

- We support LDCT lung cancer screening per guidelines from the United States Preventive Services Task Force (USPSTF) and the Centers for Medicare & Medicaid Services.
- Our Clinical Policy Bulletin for our commercial plan members matches USPSTF criteria.
- We wish to reduce the population that requires screening through smoking prevention and cessation.
- We support consideration of ACO partnership incentives for primary care physicians.

Our smoking cessation program

- We provide no cost smoking screening, counseling, cessation aids such as medications and up to 8 classes per year in compliance with the ACA as part of the Routine Preventive Care Services benefit
- An additional benefit is available to plan sponsors as part of our Healthy Lifestyle Coaching (HLC) program and CaféWell open to commercial members over age 18.
- Plan sponsor participation is currently 10 percent of membership or 2.7 million lives.
- Our High-Risk Pregnancy Coaching program provides a key intervention opportunity by offering smoking cessation counselling for pregnant members.

Potential for long-term change

- **Increase** participation in smoking cessation programs
- **Prevent** tobacco use through pediatric provider intervention, consistent with American Academy of Pediatrics guidelines.
- **Stop** current tobacco use through primary care physician intervention
- **Consider** using new "check before proceeding" box in EMR to confirm prevention/cessation counselling (accomplish via software and user reporting updates)

Also potential for LDCT screening to:

- Become a HEDIS measure
- Impact STAR ratings
- Become a National Quality Forum measure
- Impact ACO measures

Thank you