

Lung Cancer Screening and Billing and Coding



Ashutosh Sachdeva, MBBS, MBA, FCCP

Associate Professor of Medicine

Chief, Section of Interventional and Onco-Pulmonology
Director of Bronchoscopy and Interventional Pulmonology

Fellowship Director, Interventional Pulmonology

Division of Pulmonary and Critical Care

University of Maryland School of Medicine



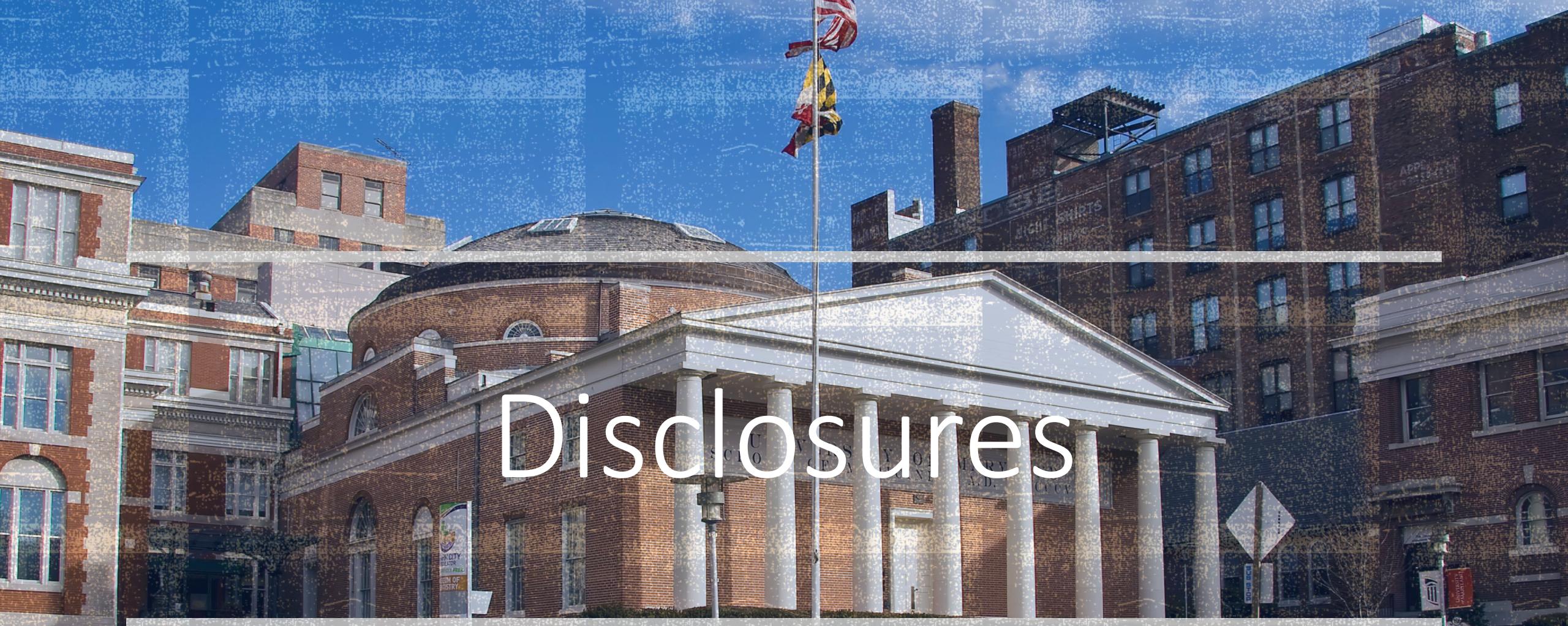
The Homer Gudelsky Building

UNIVERSITY OF
MARYLAND
MEDICAL SYSTEM

UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE A.D. M. CCCVI

GREENE ST.
TO
South

295



Disclosures



None related to the topic of presentation

Reduced Lung-Cancer Mortality with Low-Dose Computed Tomographic Screening

The National Lung Screening Trial Research Team*

- 53,454 persons at high-risk for lung cancer at 33 US medical centers
- Randomized to undergo 3 annual screenings [T0, T1, T2]
- Cases of lung cancer and deaths from lung cancer

Reduced Lung-Cancer Mortality with Low-Dose Computed Tomographic Screening

The National Lung Screening Trial Research Team*

> 95% positive screening in both LDCT and Chest X-ray group

High-risk patients
underwent LCS



Rate of positive
screen – 24.6% in
LDCT, 6.9% X-ray

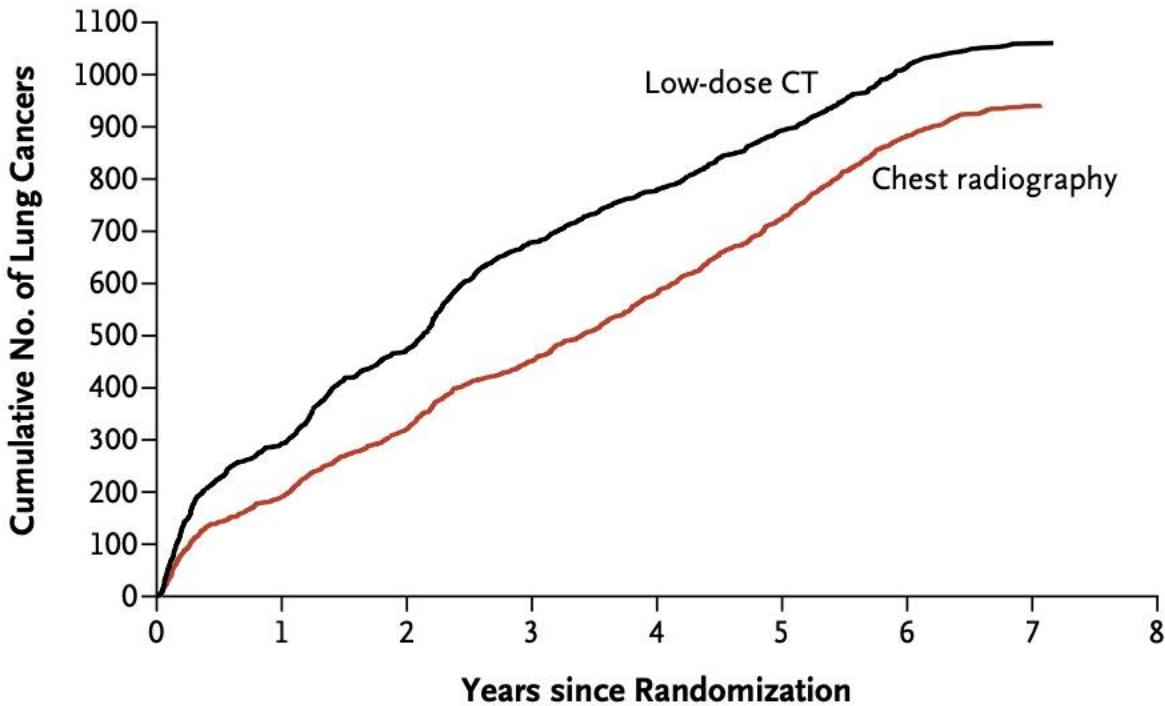


LDCT Group had
20% reduction in
relative risk of
Death

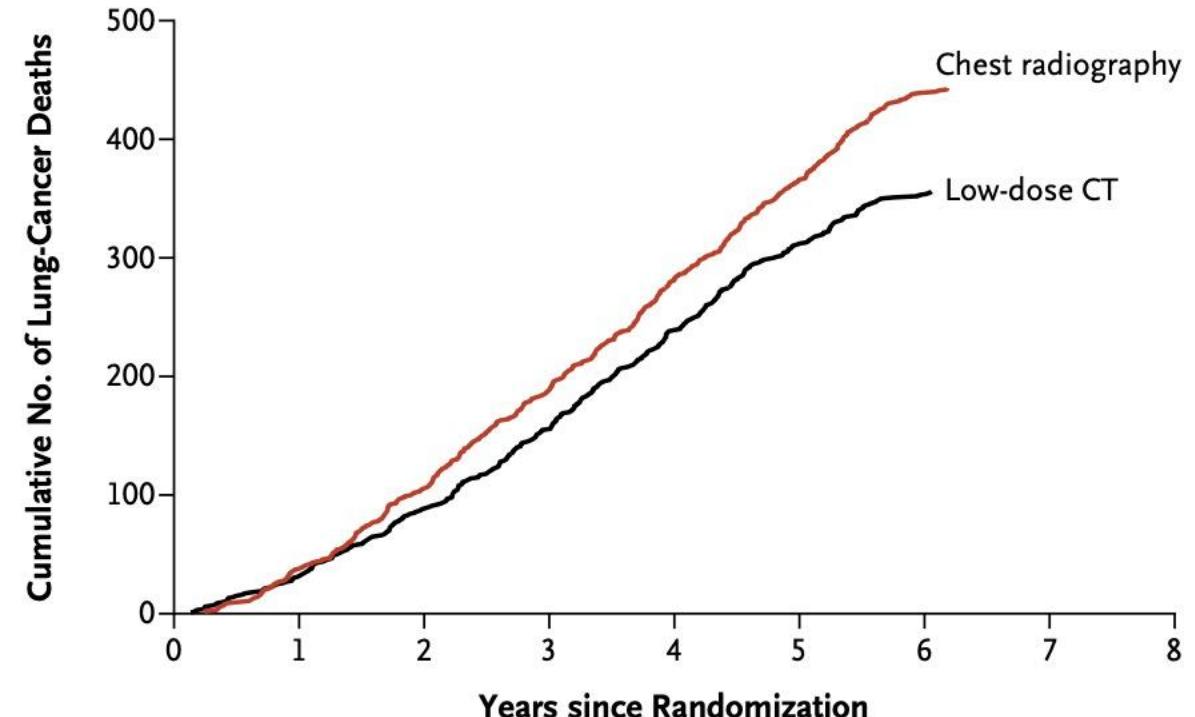
Reduced Lung-Cancer Mortality with Low-Dose Computed Tomographic Screening

The National Lung Screening Trial Research Team*

A Lung Cancer

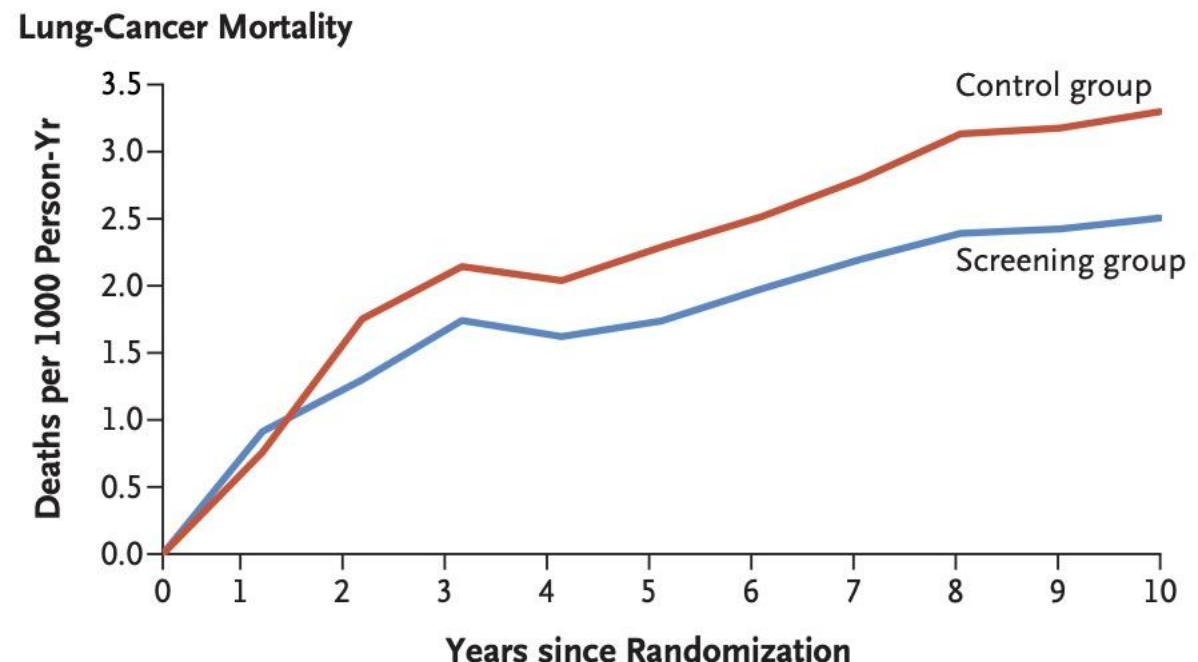
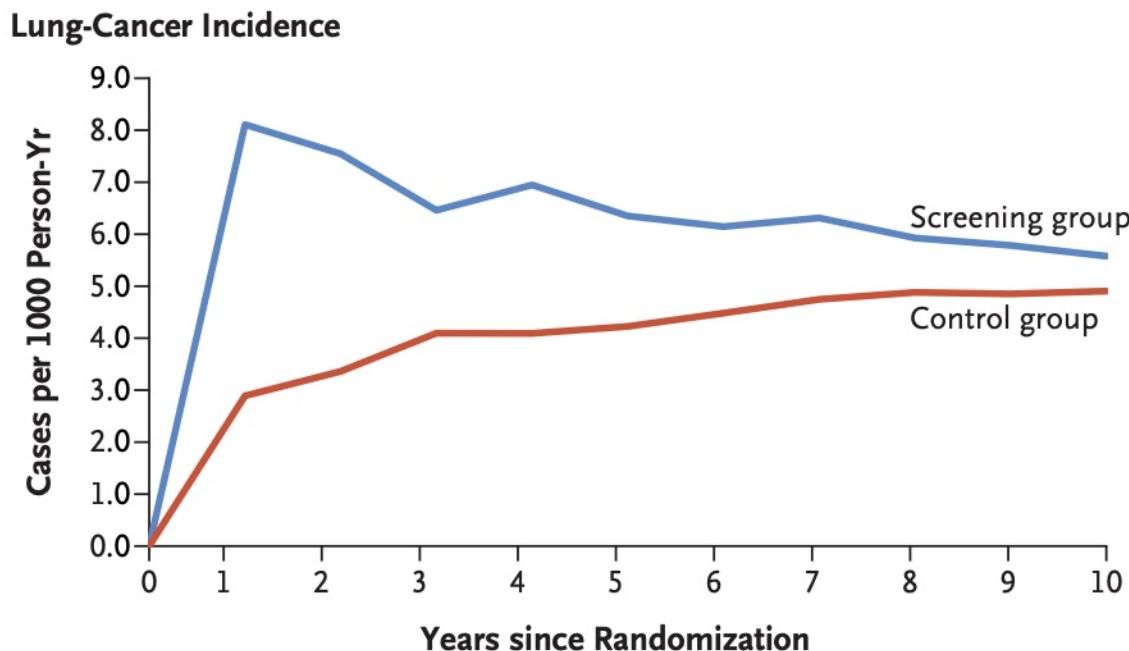


B Death from Lung Cancer



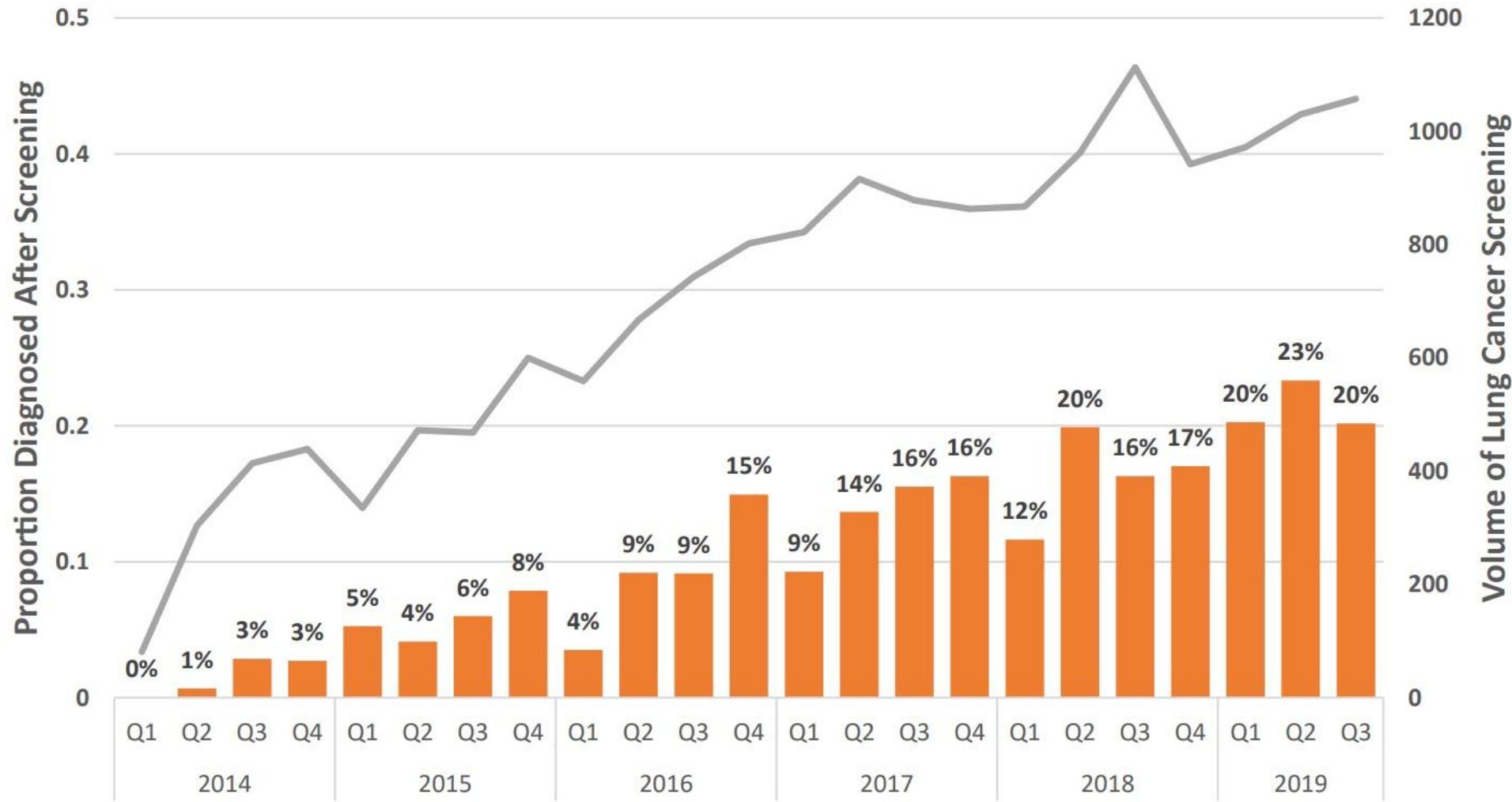
Reduced Lung-Cancer Mortality with Volume CT Screening in a Randomized Trial

H.J. de Koning, C.M. van der Aalst, P.A. de Jong, E.T. Scholten, K. Nackaerts, M.A. Heuvelmans, J.-W.J. Lammers,



de Koning HJ, van der Aalst CM, de Jong PA, Scholten ET, Nackaerts K, Heuvelmans MA, Lammers JJ, Weenink C, Yousaf-Khan U, Horeweg N, van 't Westeinde S, Prokop M, Mali WP, Mohamed Hoesein FAA, van Ooijen PMA, Aerts JGJV, den Bakker MA, Thunnissen E, Verschakelen J, Vliegenthart R, Walter JE, Ten Haaf K, Groen HJM, Oudkerk M. Reduced Lung-Cancer Mortality with Volume CT Screening in a Randomized Trial. *N Engl J Med*. 2020 Feb 6;382(6):503-513. PMID: 31995683.

Stage Migration and Lung Cancer Incidence

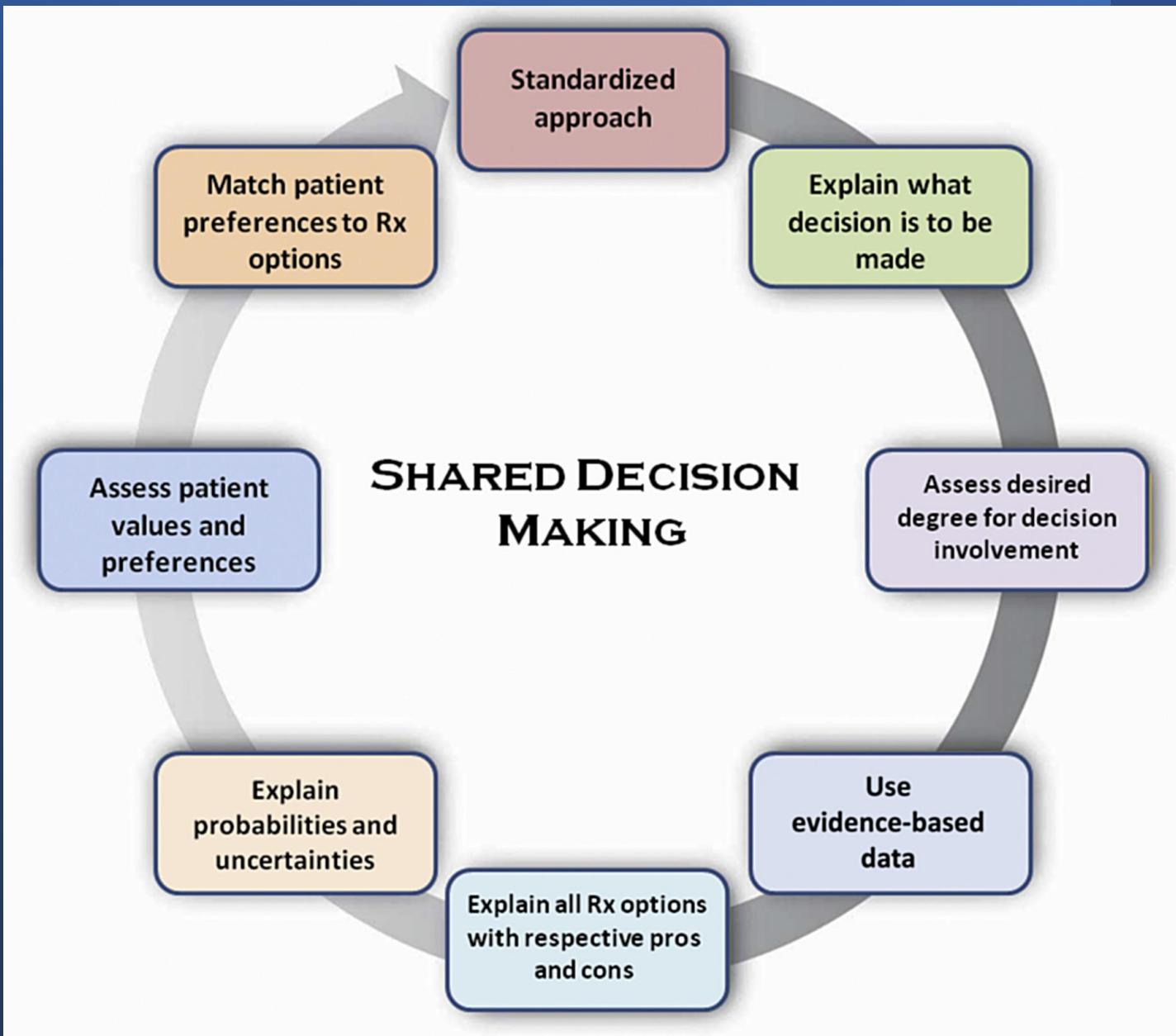


Case Discussion

79-year-old woman, former smoker [41-pack-year], CKD, HTN, DM, Hypercholesterolemia, Osteopenia, history of cervical cancer, and peripheral neuropathy presents for follow up on HTN

Patient reports exertional dyspnea with walking around one city block (~ 600 feet)

Should we offer Lung Health check up?



Medicare Coverage

USPTF

- Age 50 to 80
- 20 pack-year, current or have quit < 15 years

Medicare

- Age 50-77
- 20 pack-year, current or have quit < 15 years

Screening should be discontinued if patient develops a health problem that substantially limits life expectancy or curative intent treatment

Beneficiary
must
receive a
counseling
and shared-
decision
making visit

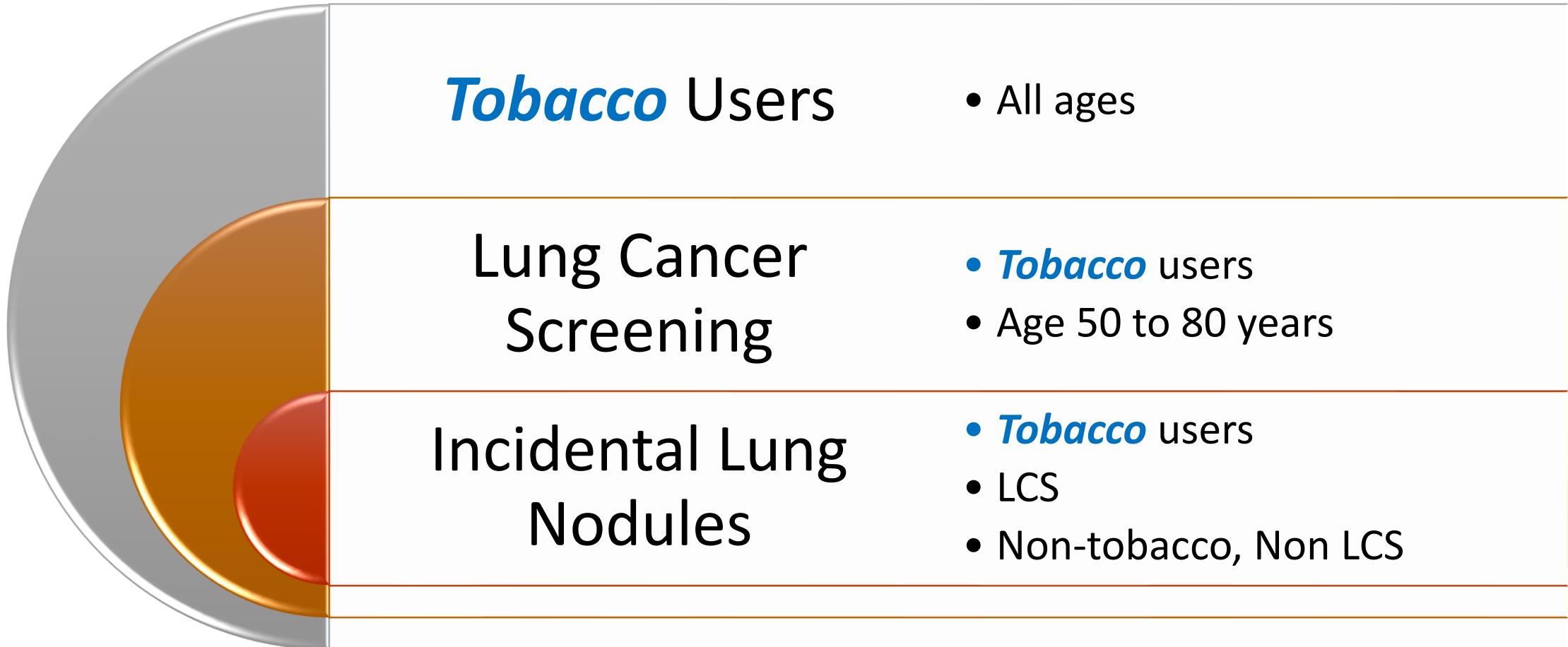
Eligibility

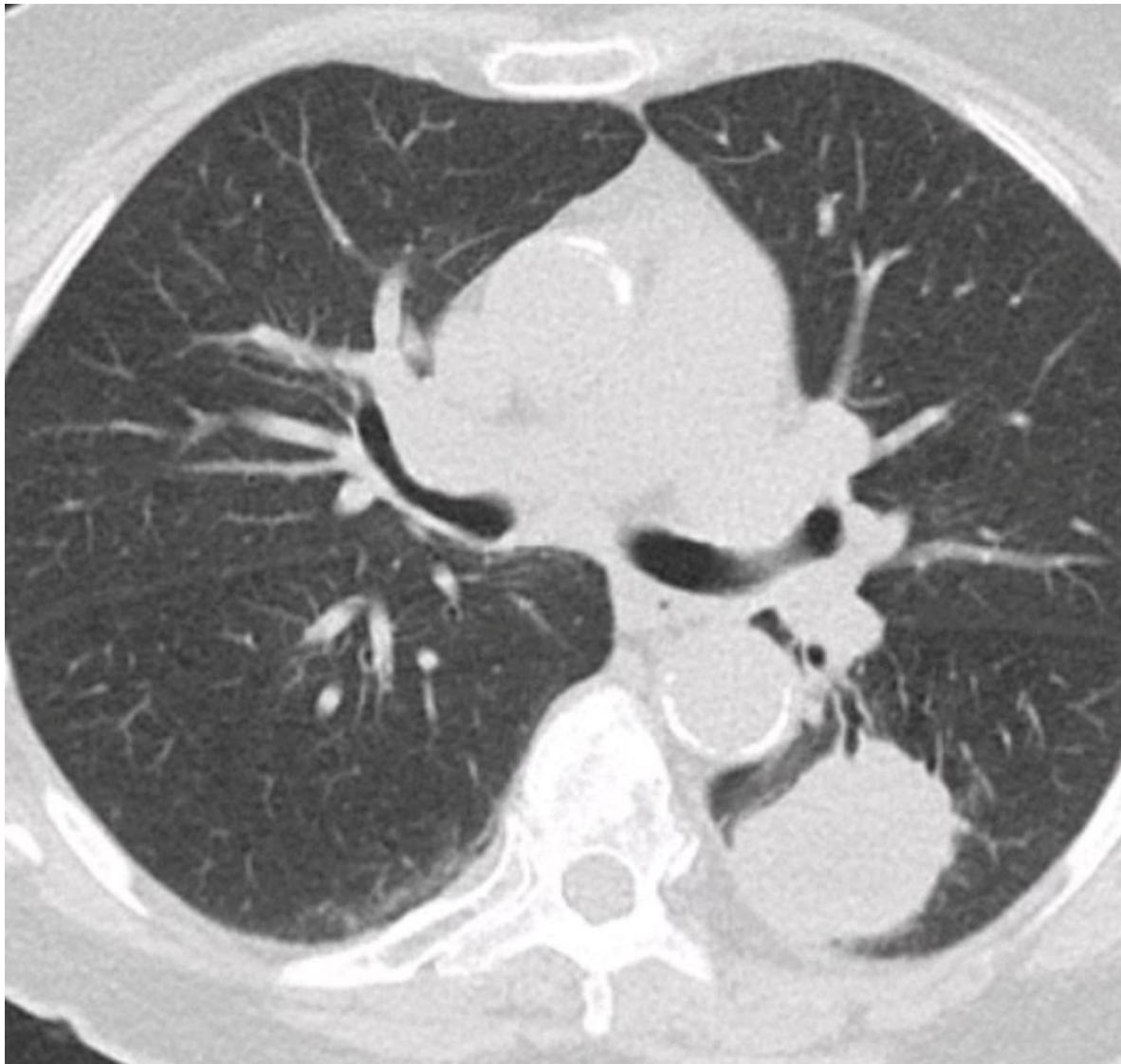
Shared-decision making, decision aids

Counseling – Adherence, Impact of co-morbidities

Importance of cigarette smoking abstinence

Lung Health & Early Detection of Lung Cancer





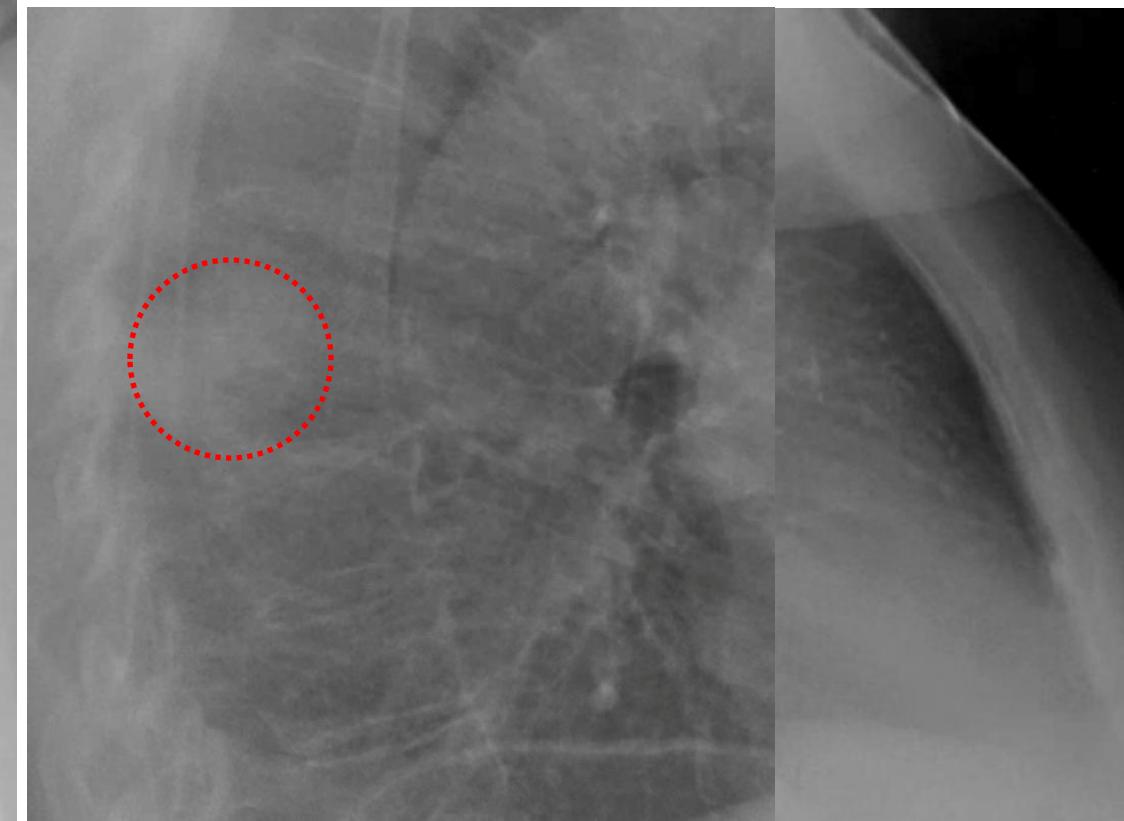
LCS CT Imaging

Tumor Size

Lymph Node

Metastasis

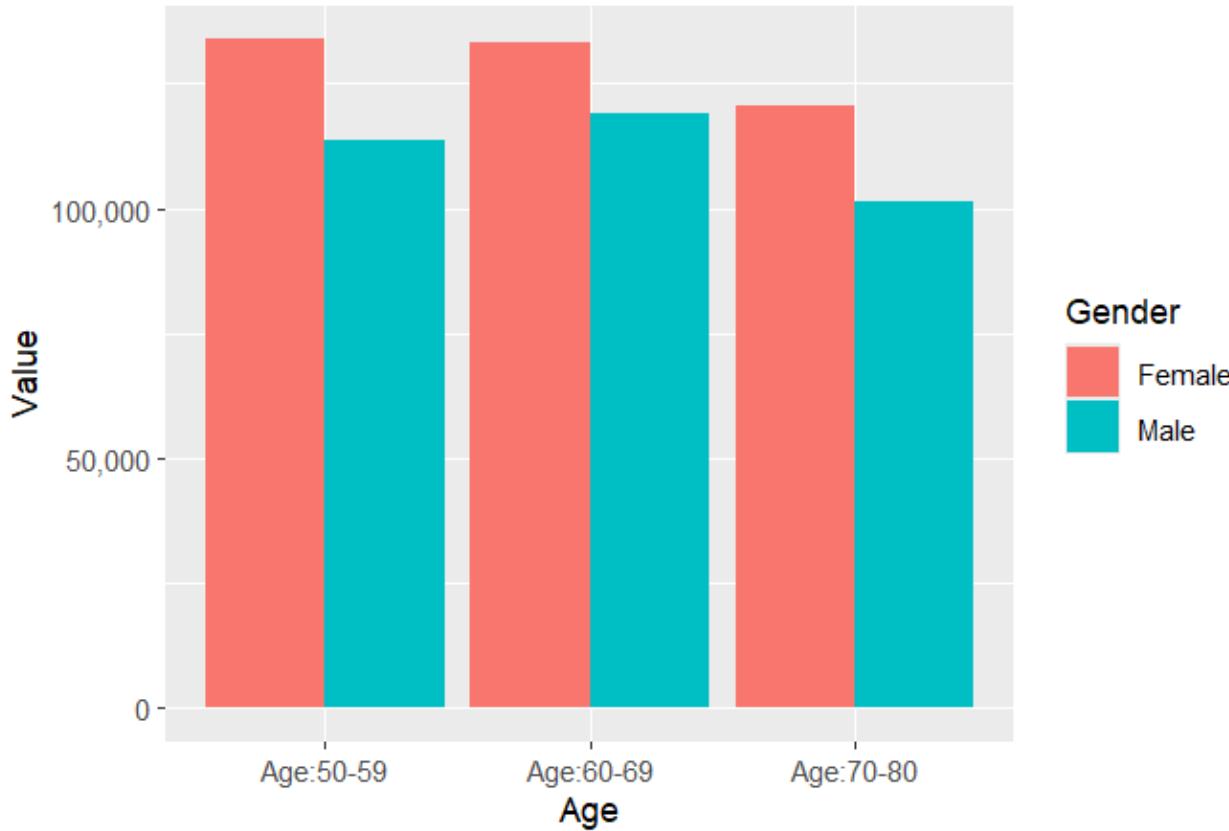
Chest X-ray 6 months ago...



Smokers at UMMS - Demographics

Patient population at UMMS from Jan 1, 2016 - Jan 31, 2025, Ages 50 – 80 = **721,766**

Patients Gender by Age



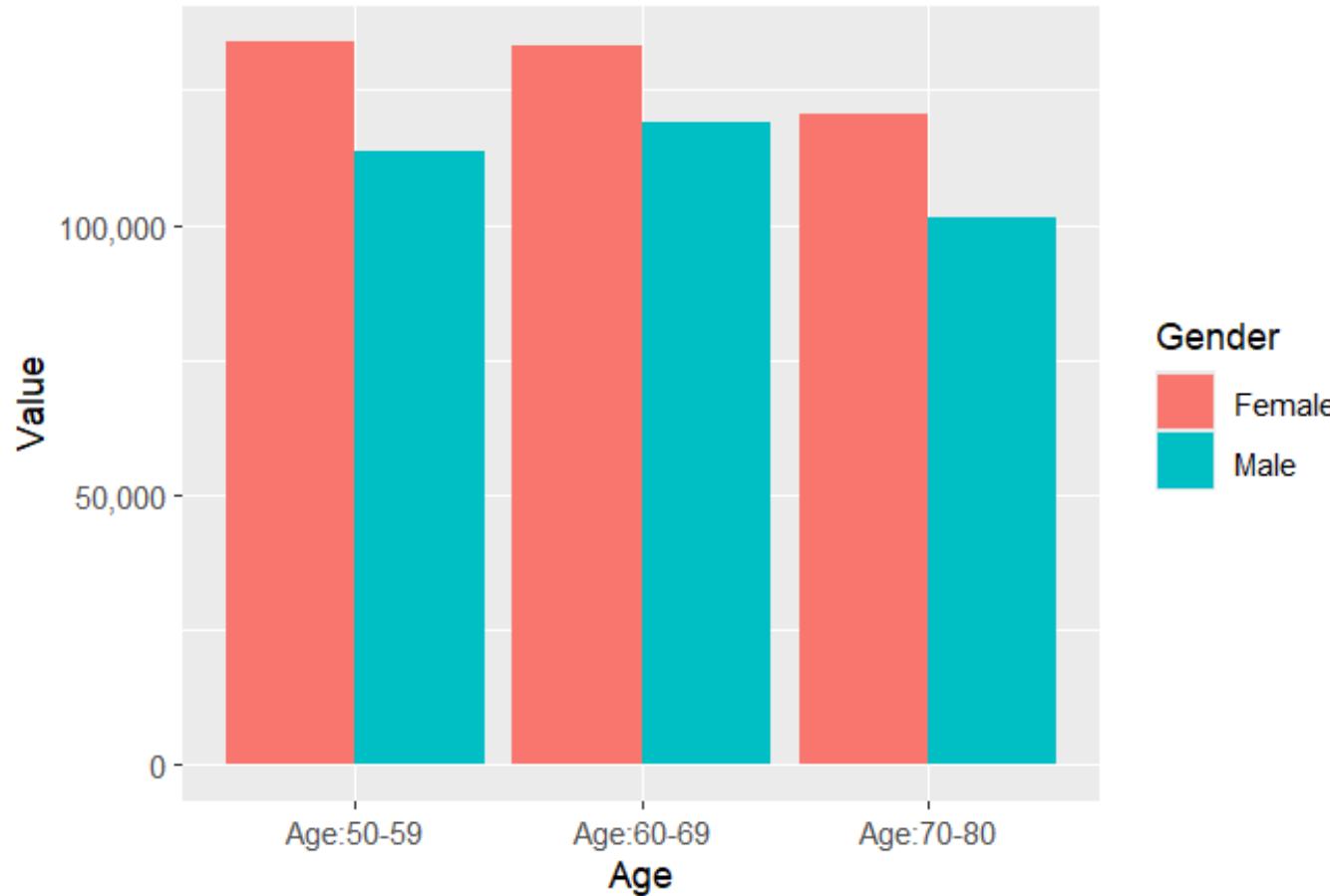
Gender
Female
Male

Gender	Range	Value	PCT
Female	Age:50-59	133918	19 %
Female	Age:60-69	133154	18%
Female	Age:70-80	120752	17%
Male	Age:50-59	113635	16%
Male	Age:60-69	119015	16%
Male	Age:70-80	101292	14%
		721766	

Smokers at UMMS - Demographics

Patient population at UMMS from Jan 1, 2016 - Jan 31, 2025, Ages 50 – 80 = **721,766**

Patients Gender by Age



Gender	Range	Value	PCT
Female	Age:50-59	133918	19 %
Female	Age:60-69	133154	18%
Female	Age:70-80	120752	17%
Male	Age:50-59	113635	16%
Male	Age:60-69	119015	16%
Male	Age:70-80	101292	14%
		721766	

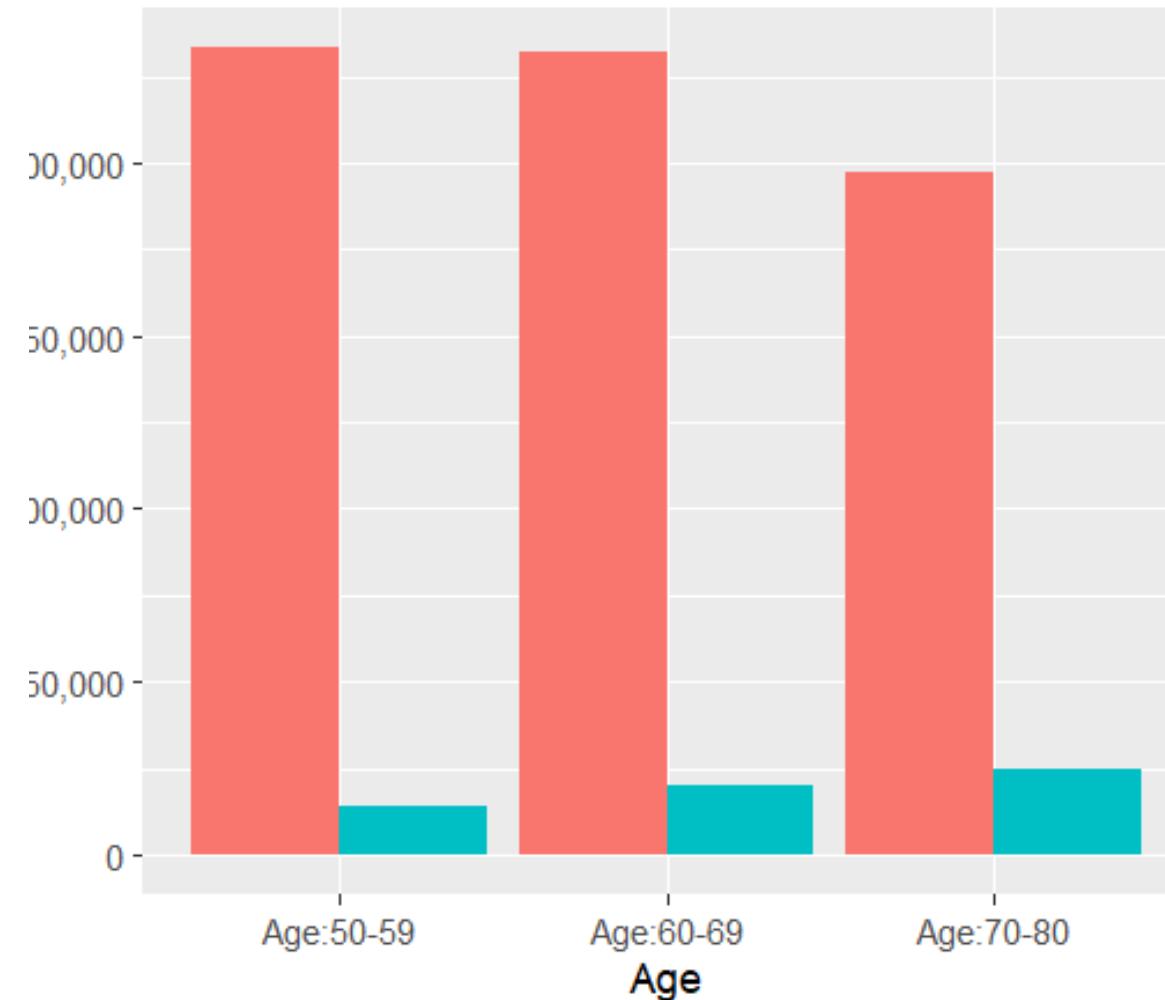
Smokers at UMMS – LDCT Screening

Patient population at UMMS from Jan 1, 2016 - Jan 31, 2025, Ages 50 – 80 = **721,766**

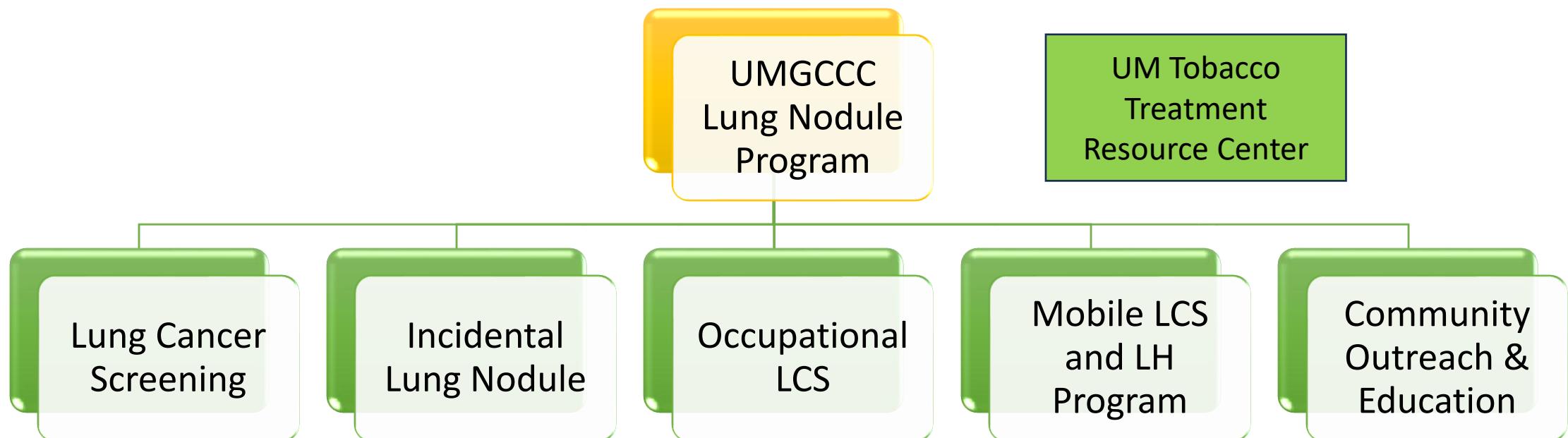
Screened

Red	No
Teal	Yes

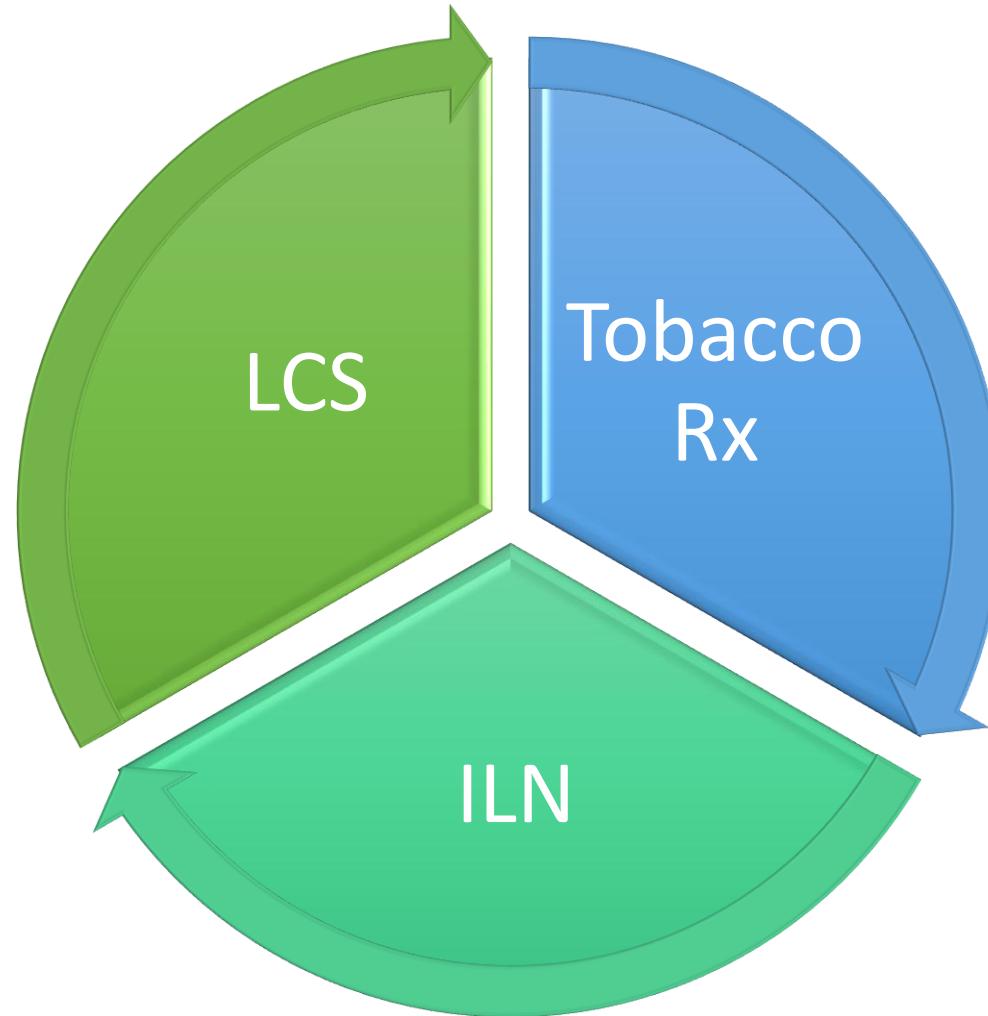
Patients Screened for Lung Cancer by Age

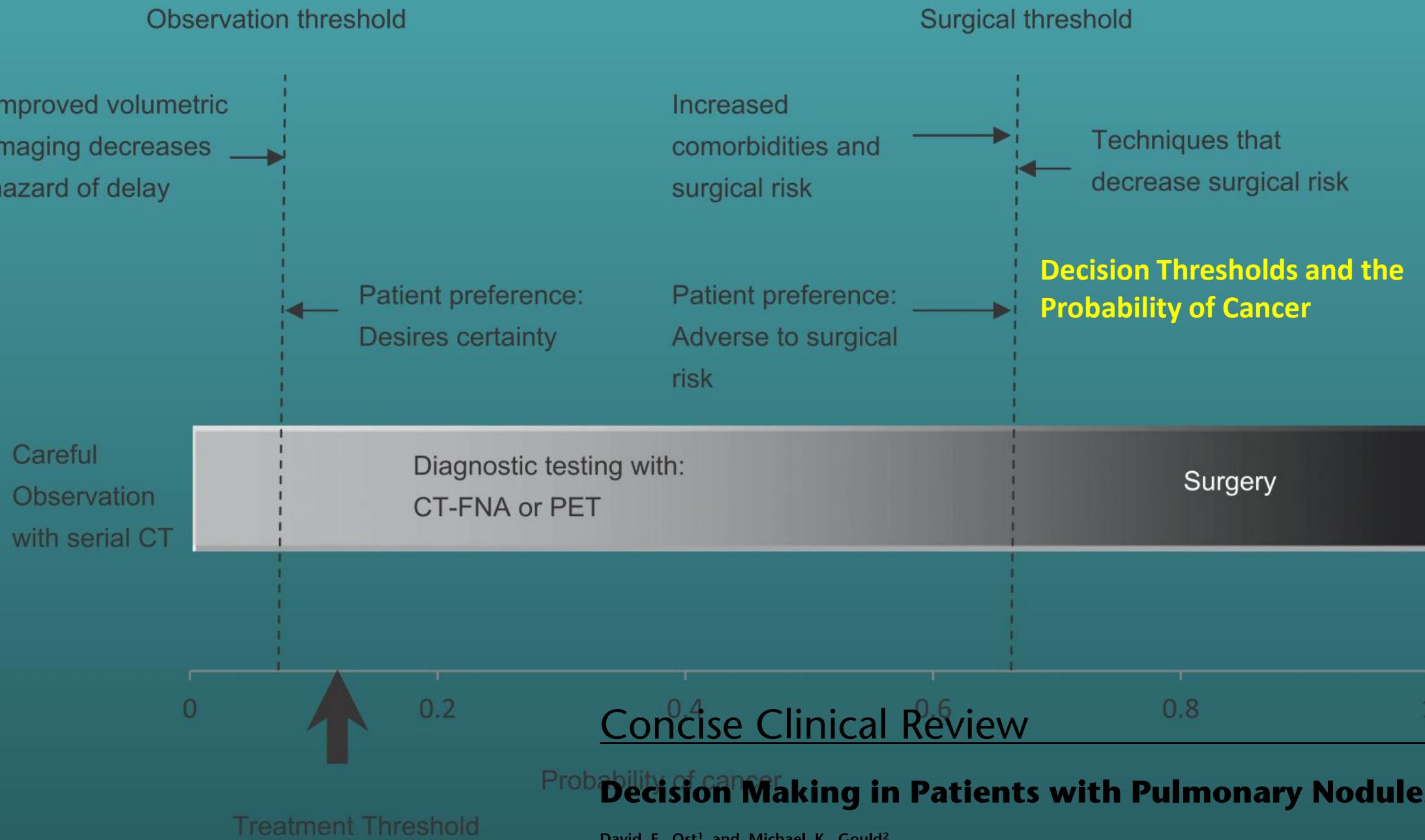


UMGCC Lung Nodule Program



UMGCC Lung Nodule Program





Summary

LCS reduces the relative risk of death from lung cancer

LCS increases rate of detection of early lung cancer

Tobacco treatment programs are integral to LCS programs

Shared-decision making needs to be documented for with appropriate coding for billing the visit

