Among other requirements, the requesting facility provider must:

- Be a participating UPMC Health Plan network facility.
- Meet and maintain the following standards modeled on the guiding principles of the Lung Cancer Alliance (LCA) framework for excellence in lung cancer screening:
  - Credentialed with UPMC Health Plan and UPMC Insurance Services Division
  - Accredited by the American College of Radiology (ACR)
  - Designated Screening Center of Excellence for LDCT Lung Cancer Screening by the LCA
  - Designated ACR Lung Cancer Screening Center
  - Current, active, and compliant participant of the International Early Lung Cancer Action Program (I-ELCAP)
- Demonstrate candidate selection for LDCT lung cancer screening is based on current evidence-based guidelines for selecting at-risk patients from the following:
  - United States Preventive Services Task Force (USPSTF)
  - National Comprehensive Cancer Network
  - Other comparable guidelines reviewed and approved by the UPMC Health Plan and UPMC Insurance Services Division Medical Director
- Have a multi-detector, helical CT scanner with a minimum of four channels capable of performing low-dose CT scans.
- Demonstrate compliance with the comprehensive standards developed by the National Lung Screening Trial (NLST) based on best practices for controlling low-dose CT scan quality, radiation dose, and diagnostic procedures and compliance with clinical follow-up protocols and guidelines.
- Demonstrate that the risks and benefits of the screening process are fully explained in language appropriate to the candidate.
• Submit a dose optimization program, including policies, protocols, and checklists for low-dose CT screening, comparable to those established by NLST. This would include, but not be limited to:
  - Multi-detector, helical CT scanner.
  - Radiation technologists experienced in calculations of radiation dose specific to each patient.
  - Regular quality assurance testing of the scanner.
  - Regular inter-observer evaluation/testing for the interpretation of low-dose CT scans.

• Provide evidence of standardized low-dose CT screening policies, protocols, and guidelines for follow-up of abnormal imaging findings consistent with NLST.

• Have a multidisciplinary team on staff or through approved, collaborative agreements to provide a coordinated continuum of care. The team must include:
  - Radiologists experienced in lung nodule interpretation and management protocols.
  - Pathologists.
  - Pulmonologists.
  - Medical oncologists.
  - Radiology oncologists.
  - Thoracic surgeons.
  - American Registry Radiology Technologists (ARRT)-certified radiation technologists experienced in dosing calculations.
  - Nurses and other support staff to assist with the coordination of care.

• Offer a comprehensive smoking cessation program with processes in place to track member referral, enrollment, completion, and “quit” rates.

• Have processes for:
  - Expeditious reporting of results to the members screened.
  - Making appropriate referrals.
  - Transmission of reports/scans in timely manner for requested second opinions or transfers of case.
  - Participate in approved outcomes data collection. (CMS discussion notes it will require an approved national registry.)