



Standards for Lung Cancer Screening Centers of Excellence

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
OR
 - Designated ACR Lung Cancer Screening Center
OR
 - 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:
 - Expedient 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.)

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