

Low Dose CT Lung Cancer Screening (71271) 210.14

Indications:

Effective for claims with dates of service on or after February 10, 2022, CMS has determined that the evidence is sufficient to cover, under Medicare Part B, a lung cancer screening counseling and shared decision-making visit, and for appropriate beneficiaries, annual screening for lung cancer with LDCT, as an additional preventive service benefit under the Medicare program, only if all of the following eligibility criteria are met.

Beneficiary Eligibility Criteria

Beneficiaries must meet all of the following eligibility criteria:

- Age 50 – 77 years;
- Asymptomatic (no signs or symptoms of lung cancer);
- Tobacco smoking history of at least 20 pack-years (one pack-year = smoking one pack per day for one year; 1 pack =20 cigarettes);
- Current smoker or one who has quit smoking within the last 15 years; and,
- Receive an order for lung cancer screening with LDCT.

Counseling and Shared Decision-Making Visit

Before the beneficiary's first lung cancer LDCT screening, the beneficiary must receive a counseling and shared decision-making visit that meets all of the following criteria, and is appropriately documented in the beneficiary's medical records:

- Determination of beneficiary 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, impact of comorbidities and ability or willingness to undergo diagnosis and treatment; and,
- Counseling on the importance of maintaining cigarette smoking abstinence if former smoker; or the importance of smoking cessation if current smoker and, if appropriate, furnishing of information about tobacco cessation interventions.

Reading Radiologist Eligibility Criteria

The reading radiologist must have board certification or board eligibility with the American Board of Radiology or equivalent organization.

Radiology Imaging Facility Eligibility Criteria

Lung cancer screening with LDCT must be furnished in a radiology imaging facility that utilizes a standardized lung nodule identification, classification, and reporting system.

Limitations:
One lung cancer screening counseling and shared decision-making visit and one annual screening for lung cancer with LDCT is covered for beneficiaries who meet the eligibility criteria (12 months must have elapsed between screening tests)
Patients who require a follow-up LDCT at an interval of less than one year due to a positive or abnormal finding should have an order placed for an Interval Follow Up LDCT , and not a Screening LDCT

Diagnoses (which meet medical necessity) *	
Z12.2	Encounter for screening for malignant neoplasm AND one of the following diagnoses:

F17.210	Nicotine dependence, cigarettes, uncomplicated
F17.211	Nicotine dependence, cigarettes, in remission
F17.213	Nicotine dependence, cigarettes, with withdrawal
F17.218	Nicotine dependence, cigarettes, with other nicotine-induced disorders
F17.219	Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders
Z87.891	Personal history of tobacco use/personal history of nicotine dependence

*Note: **Two diagnoses are required to meet medical necessity (Z12.2 plus one other code listed above)**. These are the only diagnoses which meet medical necessity for LDCT Lung Cancer Screening.

National Coverage Determination – Lung Cancer Screening with Low Dose CT:

<https://www.cms.gov/medicare-coverage-database/view/ncd.aspx?ncdid=364&ncdver=2&bc=0>

Covered diagnoses and payment rules: (After clicking on the link, download the zip file)

<https://www.cms.gov/Medicare/Coverage/DeterminationProcess/downloads/CR12124.zip>

The above CMS and WPS-GHA guidelines are current as of: 1/01/2024.