



The Society
of Thoracic
Surgeons



PRESS RELEASE

For Immediate Release:

Call Widens for Medicare CT Lung Cancer Screening Coverage *Patient Advocacy and Medical Organizations Lay Out Infrastructure and Quality Control Measures*

Washington (Sept. 29, 2014) — More than 60 patient advocacy and medical organizations have joined a coalition headed by the Lung Cancer Alliance, the American College of Radiology and The Society of Thoracic Surgeons, in urging Medicare to cover low dose computed tomography ([LDCT screening](#)) for beneficiaries at high risk for lung cancer.

In a [new joint letter](#) to the Centers for Medicare & Medicaid Services (CMS), the coalition, now including the American Cancer Society, American Cancer Society Cancer Action Network and the American Society of Clinical Oncology, outlined conditions under which Medicare should cover the exams; verified quality control measures to ensure safe, equitable care; and asked Medicare to support existing data registries and screening infrastructure.

“The American Cancer Society carefully considered the evidence supporting screening for lung cancer with low dose CT scans and issued a guideline recommending screening for people at high risk based on age and smoking history. This vital new screening tool is required by law to be available to most individuals with commercial insurance, but not those covered by Medicare. It’s time to extend coverage to all who may benefit from screening,” said Richard C. Wender, M.D., chief cancer control officer of the American Cancer Society. “We look forward to working with other interested parties to encourage Medicare to cover lung cancer screening and ensure that the exams are delivered in a high quality manner.”

“We are pleased the larger cancer community has joined us in calls for Medicare coverage for CT lung cancer screening. This is an important day for seniors and for CMS. An unprecedented coalition of medical, professional and public health leaders has come together to help assure that high quality CT screening for at risk seniors can be deployed safely, equitably and cost effectively,” said Laurie Fenton Ambrose, president and chief executive officer of the Lung Cancer Alliance.

The [United States Preventive Services Task Force \(USPSTF\) recommended](#) (with a Grade of “B”) LDCT lung cancer screening of adults aged 55-80 who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years. The groups want CMS to provide full coverage for this high-risk group, support existing data registry coordination to track outcomes and provide coverage with evidence development for others at risk beyond those in the USPSTF recommendations.

LDCT screening [significantly reduces](#) lung cancer deaths. The test [works as well](#) in people age 65 and over as it does in those 50-64. It has been shown to be cost effective [in Medicare](#) and [privately insured](#) patients. [Published results](#) show no undue or lasting patient anxiety from the exam results process.

“The infrastructure is in place to help ensure the quality, safety and consistency of these exams. Medicare just needs to provide coverage to support these efforts and help physicians save lives,” said Douglas E. Wood, M.D., immediate past president of The Society of Thoracic Surgeons.

The Affordable Care Act (ACA) requires private insurers to cover medical exams that receive a USPSTF grade of “B” or higher. The ACA does not specify that Medicare beneficiaries receive full coverage for these services. As it stands, the privately insured would have ready screening access, while Medicare beneficiaries remain at higher risk of lung cancer death due to lesser screening access.

“The time tested breast cancer screening framework has been readily adapted to enable safe, appropriate and high-quality lung cancer screening. It is time for Medicare to support this process by covering these exams so that we can bring this lifesaving technology to people at risk for lung cancer,” said Ella Kazerooni, M.D., FACR, chair of the American College of Radiology Lung Cancer Screening Committee and American College of Radiology Thoracic Imaging Panel.

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About the American Cancer Society

For more than 100 years, the American Cancer Society (ACS) has worked relentlessly to save lives and create a world with less cancer and more birthdays. Together with millions of our supporters worldwide, we help people stay well, help people get well, find cures and fight back against cancer.

About Lung Cancer Alliance

Lung Cancer Alliance (LCA) is committed to saving lives and accelerating research by empowering people living with or at risk for lung cancer. LCA provides live, professional support, referral and information services to patients, their loved ones and those at risk for lung cancer; conducts national awareness campaigns including the award winning No One Deserves to Die Campaign attacking the stigma of the disease and the Moments Campaign spreading word about the risk and screening with a risk navigator tool for consumers; and advocates for multiple millions in public health dollars for lung cancer research. For more information please visit www.lungcanceralliance.org.

About the American College of Radiology

The American College of Radiology (ACR), founded in 1924, is one of the largest and most influential medical associations in the United States. The ACR devotes its resources to making imaging and radiation therapy safe, effective and accessible to those who need it. Its 35,000 members include radiologists, radiation oncologists, medical physicists, interventional radiologists and nuclear medicine physicians.

About The Society of Thoracic Surgeons

Founded in 1964, The Society of Thoracic Surgeons is a not-for-profit organization representing more than 6,800 cardiothoracic surgeons, researchers, and allied health care professionals worldwide who are dedicated to ensuring the best possible outcomes for surgeries of the heart, lung and esophagus, as well as other surgical procedures within the chest. The Society's mission is to enhance the ability of cardiothoracic surgeons to provide the highest quality patient care through education, research and advocacy.