



How to Find Lung Cancer Screening Coverage Information for a Medicaid Plan

The United States Preventive Services Task Force recommends annual screening for lung cancer with low-dose computed tomography (LDCT) for adults ages 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years. Standard Medicaid plans are not required to cover lung cancer screening, although plans that cover Medicaid Expansion enrollees should cover this preventive service.

Each state structures its Medicaid program differently. Some states only have a fee-for-service (FFS) program, where the state contracts directly with healthcare providers to pay for services that Medicaid enrollees use. However, many states also contract with managed care organizations (MCOs), private health insurance companies that often receive a per-member per-month fee to manage the healthcare needs and expenses of Medicaid enrollees.

Coverage of LDCT scans for individuals at high risk for lung cancer can vary from plan to plan within a state. This document can help you find coverage information for an individual Medicaid plan.

Figure Out Your Plan

Check your insurance card or plan materials like welcome letters or other introductory paperwork to see who your insurer is. Keep in mind as you try to identify coverage information that you need to look at the health plan's Medicaid plan information, not commercial plan information. The health insurance company may offer many different plans in a state that offer different benefit packages.

Identify Coverage Information

Medicaid programs and MCOs usually provide handbooks for their members, which can typically be found on the program or plan websites. These can serve as starting points to obtain information about preventive services like lung cancer screening, as well as information on any copays charged for services.

Another place to check is the provider section of a health plan's website. This often contains resources like provider manuals or bulletins and newsletters targeted to providers with information about coverage. Look for headings like preventive services or radiology services. This section may also have an online resource library specific to the health plan that includes medical or clinical policy documents that outline coverage criteria and limitations.

Finally, you can also check your state Medicaid program's fee schedule—a document which lists covered services by their Current Procedural Terminology (CPT) codes along with the fees that the state will pay providers for these services—on

its website. The code for LDCT screening is G0297. Some MCOs have prior authorization procedure search tools and precertification lookups on their websites where CPT codes can be entered to see if a procedure is covered and whether prior authorization is required. It is important to note that some search tools specify that finding the prior authorization requirements does not guarantee coverage and, in those cases, it is best to verify coverage with the Medicaid office.

Key Questions to Ask

Once you find coverage information, key questions to ask include:

- **Do I meet the eligibility criteria?** Screening is only recommended for certain individuals at high risk based on age and history of tobacco use. Medicaid programs and MCOs may have additional criteria that individuals need to meet before screening will be covered.
- **Is prior authorization required?** Your provider may need to obtain preapproval from the Medicaid office or health plan before screening will be covered.
- **Are copays required?** Check to see if there are any costs associated with this screening.

Final Tips

Remember that each Medicaid program and plan is different – so the place that you find coverage information for one plan might not work for others. This list of potential sources of coverage information is also not exhaustive—occasionally, coverage information also appears in state plan amendments, Medicaid managed care contracts, or other resources not discussed in detail here.

Finally, even if no information is found, a plan may still cover lung cancer screening. Contacting individual managed care plans or Medicaid offices directly can provide additional information that may not be publicly available.

