

Lung Cancer Screening: Coverage in Health Insurance Plans

The 2011 National Lung Screening Trial (NLST) found screening individuals at high risk for lung cancer could reduce mortality from the nation's leading cancer killer by as much as 20 percent. Subsequently, the U.S. Preventive Services Task Force gave lung cancer screening a 'B' recommendation, and Medicare also added coverage of screening for individuals at high risk. Below is an explanation of how screening is covered for various types of insurance.

Plan/Type of Plan	Population Served by Plan	Requirement for Coverage of Lung Cancer Screening (Must meet ALL criteria)	Cost-Sharing Allowed?
Medicare's National Coverage Determination			
Traditional Medicare	Ages 65+	Coverage implemented in Medicare Part B for ages 55-77. No signs or symptoms of lung cancer 30 pack-years smoking history Current smoker or quit smoking in the last 15 years	No, patients should not be charged a copay, coinsurance, or deductible for screening. However, patients must go to a Medicare-approved facility and provider to avoid extra costs.
Medicare Advantage (MA)	Ages 65+ who opt for Medicare Advantage plans	Coverage required for ages 55-77. MA plans may opt to cover screening for individuals 78 and older. No signs or symptoms of lung cancer 30 pack-years smoking history Current smoker or quit smoking in the last 15 years	No, patients should not be charged a copay, coinsurance, or deductible for screening. However, patients may need to go to an "in network" facility and provider to avoid extra costs.
U.S. Preventive Services Task Force (USPSTF) Recommendation**			
Medicaid Expansion	Incomes up to 138% of the Federal Poverty Level (in states that have chosen to expand Medicaid), including childless adults	Age 55-80 30 pack-years smoking history Current smoker or quit smoking in the last 15 years	No, patients should not be charged a copay or other costs for screening. However, patients should check if there are certain facilities or providers they must use for the screening to avoid extra costs.
State Health Insurance Marketplace Plans	Mostly the unemployed, self-employed, part-time workers, and employees of small companies. Individuals and families who make up to 400% of the Federal Poverty Level are eligible for subsidies	Age 55-80 30 pack-years smoking history Current smoker or quit smoking in the last 15 years	No, patients should not be charged a copay, coinsurance, or deductible for screening. However, patients may need to go to an "in network" facility and provider to avoid extra costs.

Large Group and Self-Insured Plans*	Employees of large employers (over 50 employees), member of unions	Age 55-80 30 pack-years smoking history Current smoker or quit smoking in the last 15 years	No, patients should not be charged a copay, coinsurance, or deductible for screening. However, patients may need to go to an “in network” facility and provider to avoid extra costs.
Other			
Traditional Medicaid	Lowest income individuals, mostly children, pregnant women and disabled	No automatic requirement. Coverage set by state policymakers.	Yes
Small Group and Individual Plans (Outside Marketplaces)*	Mostly the unemployed, self-employed, part-time workers, and employees of small companies.	Many plans must comply with the USPSTF standard mentioned above. However, certain plans – like short-term limited-duration plans, association health plans and plans sold directly by farm bureaus or health ministries – do not have to follow these standards and may not cover lung cancer screening.	Varies.

* Grandfathered plans are not required to cover preventive services without cost-sharing.

** The U.S. Preventive Services Task Force (USPSTF) issued a new ‘B’ recommendation for lung cancer screenings on December 30, 2013 for those at high risk. Under the Affordable Care Act, most plans must cover preventive services given an ‘A’ or ‘B’ by the USPSTF.