

# SFL/CHAP NEWSLETTER

The Resource for Screening For Life and Community Healthcare Access Program Updates

Issue 9

June 2015

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## Upcoming Events:

For a full calendar of events, go to:

<http://www.cancersupportdelaware.org/upcomingevents.php>

[www.healthylouisiana.org](http://www.healthylouisiana.org)



DELAWARE HEALTH AND SOCIAL SERVICES  
Division of Public Health

screening for life

<http://dhss.delaware.gov/dhss/dph/dpc/sfl.html>

## SFL Lung Cancer Screening Program

The Division of Public Health's Screening for Life Program will now cover lung cancer screenings for Delawareans who qualify for the Screening for Life Program. The screening — known as a low-dose CT scan — aims to catch lung cancer early, when it is most treatable.

Lung cancer, which is the number one cancer killer of Delaware men and women, accounts for more than 30 percent of all cancer deaths. When compared to standard chest X-rays, the National Lung Screening Trial found that low-dose CT scans lower the risk of dying from lung cancer by up to 20 percent.

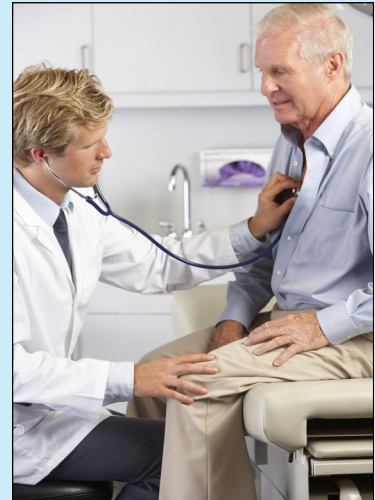
Christiana Care Health System, Bayhealth Medical Center, and Beebe Healthcare will offer the screening.

The screening is available to current and former smokers deemed at high-risk for lung cancer. This includes men and women who:

- ◆ Currently smoke or quit smoking within the last 15 years

- ◆ Smoke or have smoked the equivalent of a pack a day for 30 or more years

- ◆ Are 55 to 80 years of age



These high-risk individuals should visit [www.HealthyDelaware.org/lung](http://www.HealthyDelaware.org/lung) or call 302-401-4212 to speak with a screening nurse navigator, who serves as a guide through the entire process.

## ACA — Information to Share with Patients

The Affordable Care Act (ACA) requires all eligible citizens have minimum essential health care insurance coverage. *To obtain health care coverage:*

### Medicaid and Children's Health Insurance Program (CHIP)

Citizens can obtain coverage through Medicaid and CHIP if they meet the income qualifications. To apply, visit <https://assist.dhss.delaware.gov/>.

### Health Insurance Marketplace

Enrollment for private insurance on the Health Insurance Marketplace is available for people with incomes above 138 percent of the federal poverty level (FPL). General enrollment is scheduled to re-open on Nov. 1, 2015 and close Jan.

31, 2016. Delawareans can obtain insurance on the Health Insurance Marketplace before Nov. 1 if they have a qualifying life event. Events that may qualify for enrollment at any time include: getting married or divorced; having a child, adopting a child or placing a child for adoption; a change in income; losing other health coverage; becoming pregnant; experiencing other changes that affect income and household size; change in place of residence; change in disability status; and gaining or losing a dependent.

Visit [www.ChooseHealthDE.com](http://www.ChooseHealthDE.com) to learn about health insurance options, including potential eligibility for a financial "subsidy" (also known as an advanced premium tax credit) that will lower the cost of coverage. For more information, call 800-318-2596.

SFL/CHAP Newsletter is a product of the Delaware Division of Public Health's Screening For Life program. To subscribe or for more information, call 302-744-1040. To submit to the newsletter, send fax to 302-739-2546 or e-mail [teresa.gallagher@state.de.us](mailto:teresa.gallagher@state.de.us).

Screening For Life - Thomas Collins Building, Suite 11, 540 South DuPont Highway, Dover, Delaware 19901

[DHSS\\_DPH\\_Healthaccessde@state.de.us](mailto:DHSS_DPH_Healthaccessde@state.de.us)

In Delaware, as well as nationally, lung cancer is the most common cause of deaths from cancer. Delaware's lung cancer incidence rate was nearly 22 percent higher than the U.S. rate during the time period of 2007-2011. An estimated 85 to 90 percent of all lung cancers are known to be caused by tobacco use.

A recent randomized trial showed that low-dose computed tomography (LDCT) screening reduces lung cancer mortality. In January 2013, the American Cancer Society published new Lung Cancer Screening Guidelines. The guidelines recommend that doctors discuss lung cancer screening with patients who meet certain criteria that put them at high risk for developing the disease. The guidelines define high-risk patients as: (1) aged 55 to 74 years old and in fairly good health; (2) have a smoking history equivalent to a pack a day for 30 years; and (3) currently smoke or have quit within the past 15 years. The guidelines emphasize that screening is not a substitute for quitting smoking.

In addition to the American Cancer Society Guidelines, the United States Preventive Services Task Force (USPSTF) published a recommendation statement in December 2013. The USPSTF graded lung cancer screening as a "B." This means the USPSTF recommends the service. They believe there is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial. The USPSTF recommends annual screening for lung cancer with LDCT in 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. Screening should be discontinued once a person has not smoked for 15 years or



develops a health problem that substantially limits life expectancy or the ability or willingness to have curative lung surgery. Strong evidence presented in the recommendation by USPSTF shows that screening for lung cancer with LDCT can reduce lung cancer mortality. As reported by the American Cancer Society, approximately 8.6 million Americans were eligible for lung cancer screening in 2010. If the screening regimen as recommended by the USPSTF was adopted 12,250 lung cancer deaths could be averted each year in the United States.

View a summary of the USPSTF final recommendation statement on lung cancer screening (December 2013), available at <http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/lung-cancer-screening>.

## SFL Billing Reminder

### State Fiscal Year Ends June 30, 2015

State Fiscal Year 2015 dates of service for breast, cervical, colorectal, lung, and prostate cancer screenings are July 1, 2014-June 30, 2015.

Submit all bills/claims and required screening and diagnostic forms for dates of service July 1, 2014-June 30, 2015 to Screening For Life (SFL) no later than Aug. 31, 2015. If at all possible, submit all bills/claims and required documentation for services incurred up to June 8, 2015 *prior to* June 10, 2015. This will give SFL billing staff time to process your claim before the system shuts down for the state fiscal year close-out process. Any claims/bills and required documents received after June 10, 2015 will be delayed in processing for payment until after July 9, 2015. All claims and required documentation must be received by Aug. 31, 2015 in order to be processed and paid. Any bills/claims received after Aug. 31, 2015 will be ineligible for reimbursement. Refer to your provider agreement that indicates all claims/bills, and screening and diagnostics forms must be submitted to the SFL program within 60 days of the service date.

All bills, screening, and diagnostic forms must be submitted to: Screening for Life, Thomas Collins Building, Suite 11, 540 South DuPont Highway, Dover, DE 19901. Contact SFL at 302-744-1040 if you have any questions.