Improving and automating lung cancer screening

Better patient care and reimbursement through integrated systems for management, reporting, and ACR Registry integration.

Building a targeted program for LDCT lung cancer screening (LCS) requires excellent communication and meticulous attention to follow-up that can be difficult to achieve without seamless integration into the overarching department systems and workflow. Beyond the many mandated steps included in every patient screening, there is also the potential for detection of significant incidental findings. Therefore, it is especially crucial that the reporting and management of incidental findings be well integrated into the department's standard reporting and follow-up systems.

With more than 10 million Americans meeting the high-risk criteria, there is a steep burden on hospitals and imaging centers trying to run lung cancer screening programs with clinical and financial efficiency. How can providers and practices efficiently collect, report, and follow-up with lung cancer screening patients while maximizing reimbursements, improving productivity and optimizing workflows?

An end-to-end solution for lung cancer screening programs

Successful providers will facilitate program management with systems that are seamlessly integrated with their core infrastructure—reducing manual workload, improving efficiency, and intelligently prompting providers toward relevant and timely tasks.

Nuance PowerScribe Lung Cancer Screening effectively manages an end-to-end LCS program, including:

- Enrollment and eligibility verification
- Reporting assistance through add-on clinical (Lung-RADS) guidelines
- Integrated data capture from reporting systems
- Comprehensive results communication for lung screening information and incidental findings
- Workflow automation for communication tasks and patient follow-up compliance
- Operational and health outcomes measures tracking
- Integration to the ACR National Radiology Data Registry

KEY BENEFITS

- Easy management of mandated screening steps, including documentation of encounters and results communication
- Powerful custom fields for capturing all data points, including Lung-RADS scores and results, and incidental finding communication
- Data-driven off-standard workflow and report template customization
- Automated electronic delivery to the ACR
- Leverages PowerScribe's structured, flexible reporting platform

FAST FACTS

- For every 320 individuals screened, 1 life is saved from death by lung cancer
- If detected at stage 1, lung cancer
 5-year survival rate is 90%1
- On February 15, 2015, The Centers for Medicare & Medicaid Services (CMS) began **funding screening** for lung cancer with low dose computed tomography (LDCT)
- 7%-10% of patients screened will have incidental findings requiring separate follow-up



Managing positive findings across the enterprise

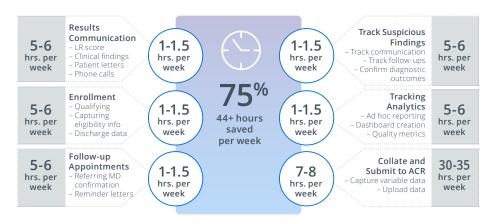
Follow-up for lung cancer screening patients with positive findings can pose serious workflow challenges for departments. Diagnostic imaging follow-up exams are sometimes ordered without exam codes specific to a screening program or proper indication of lung cancer follow-up. Given the high overall health risk for many of these patients, they may also be imaged for reasons other than lung cancer. These images and reports could contain information on changes in nodule size between screening exams, and impact the follow-up interval. Diagnostic CTs could be read by any radiologist who routinely interprets chest CTs, but who may not have extensive familiarity with the Lung-RADS scoring algorithm. PowerScribe Lung Cancer Screening connects the program navigators to patients currently enrolled in the screening program, informs them about new or unrelated imaging, and prompts each role with guidance at the appropriate time.

Leveraging your PowerScribe investment

This one-of-a-kind lung cancer screening management toolset uses the combined strength of the PowerScribe reporting platform and the Nuance PowerShare Network. This comprehensive solution eases the creation and ongoing management of lung cancer screening programs, making it easier for physicians and hospitals to screen and follow high risk-patients, as well as gain reimbursement for these services.

Estimating the actual time saved through automation of data collection

Utilizing data from currently operating lung screening programs as a basis for this analysis, including hospitals with screening programs in operation for at least 2 years and approximately 2,600 lung screening exams per year.



PowerScribe Lung Cancer Screening alongside PowerShare eases the burden of LCS reporting by combining powerful structured reporting, auto-loading templates, auto text with custom picklists, proven speech recognition technology, and the ability to designate specific fields as mandatory with the option to submit data through the ACR's Lung Cancer Screening Registry. At Nuance, we are constantly looking ahead as these and other reporting requirements evolve and expand to provide tools to meet today's needs and tomorrow's challenges.

LEARN MORE

To learn more about how Nuance Healthcare can help you improve financial performance, raise the quality of care and increase clinician satisfaction, please contact us at 1-877-805-5902 or visit nuance.com/healthcare.













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