

Lung cancer screening found cost-effective for Medicare

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(HealthDay)—Low-dose computed tomography (LDCT) is a low-cost and cost-effective strategy for screening Medicare beneficiaries for lung cancer, according to a study published in the August issue of *American Health & Drug Benefits*.

Bruce S. Pyenson, from Milliman Inc. in New York City, and colleagues estimated the cost and cost-effectiveness (cost per life-year saved) of LDCT [lung cancer](#) screening in the Medicare population at high risk for lung cancer. Medicare & Medicaid Services (CMS) beneficiary files (2012) were used to establish Medicare costs, enrollment, and demographics. CMS and U.S. Census Bureau projections were used for forecasts to 2014.

The researchers found that approximately 4.9 million high-risk Medicare beneficiaries would meet criteria for lung cancer screening in 2014.

Without screening, Medicare patients newly diagnosed with lung cancer have an average life expectancy of approximately three years. The average annual cost of LDCT [lung cancer screening](#) is estimated to be \$241 per Medicare person screened. For Medicare beneficiaries aged 55 to 80 years with a history of ≥ 30 pack-years of smoking and who had smoked within 15 years, assuming a 50 percent screening rate, LDCT screening for lung cancer is low cost, at approximately \$1 per member per month. This screening demonstrates highly cost-effectiveness, at

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