



NLCRT
NATIONAL LUNG CANCER ROUNDTABLE



ACCELERATING UPTAKE of Lung Cancer Screening

By Harnessing IT and Electronic Health Records

ACS NLCRT Workshop

October 2, 2023

Loews Rosemont
Chicago, Illinois

Thank you to our funders, who make
this work possible.



Additional thanks to AbbVie, Foundation Medicine, Guardant Health, and Novocure

The ACS NLCRT, Member Organizations, and Partners are committed to the adoption of language, phrasing, and imagery that is person-first, judgment-free, and non-stigmatizing.

This shift in language takes time and dedicated effort, and slips happen, but it is an important component of creating a more supportive and empathic environment to reduce the burden of lung cancer.

We appreciate your effort!



NATIONAL
LUNG CANCER
ROUNDTABLE

Welcome to the ACS National Lung Cancer

October 2, 2023

Dear Workshop Participants,

Welcome to the American Cancer Society National Lung Cancer Roundtable's (ACS NLCRT) workshop, ***Accelerating Uptake of Lung Cancer Screening by Harnessing Information Technology and Electronic Health Records***. We hope your travels to Chicago were smooth, and that you come ready to roll up your sleeves and work together as we begin to act on previous recommendations to accelerate uptake of screening. Together, we will ensure that more individuals are screened, ultimately creating better outcomes for those affected by lung cancer.

Accelerating the uptake of lung cancer screening is a strategic priority of the ACS NLCRT. During our July 2022 Summit, *Accelerating Uptake of Lung Cancer Screening – A National Initiative*, Summit participants identified key challenges and barriers to lung cancer screening, and developed and prioritized strategies to build a comprehensive framework that would engage key partners with actionable recommendations. Many of the challenges discussed by Summit participants focused on information technology (IT) and functionality of electronic health records (EHR) systems as a barrier to increasing lung cancer screening. Building a national consensus on core EHR elements and IT functionality to support lung cancer screening was one of the top ranked priorities by workshop participants.

Our goals are to harness the power of IT/EHR to:

- Identify eligible individuals for lung cancer screening, assess tobacco history, and discuss the incorporation of lung cancer risk models
- Optimize primary care workflows, including health maintenance activities, best practice alerts, and other tools
- Improve communication between patients, providers, and health care staff through education and outreach, including shared decision-making
- Enhance patient tracking after screening to ensure appropriate follow-up management and adherence to annual screening, and report key lung cancer screening operational and clinical outcomes metrics

Founded from the roots of collaboration among professional societies and patient advocacy organizations to work towards Medicare coverage of lung cancer screening after the USPSTF first recommended it, the ACS NLCRT lung cancer screening strategic priority is multifaceted.

Roundtable

Task Groups work to address the challenges that contribute to the low rates of lung cancer screening across the country. Many of our initiatives, from the LungPLAN™ return on investment modeling tool that helps sites build and expand lung cancer screening and nodule management programs, to our partnership with the American College of Radiology and the Department of Veterans Affairs to sponsor the 2nd annual National Lung Cancer Screening Day on November 11, 2023, we are reducing the burden of lung cancer and driving the national conversation around lung cancer screening. Together, the ACS NLCRT catalyzes action through our member organizations, volunteers, and sponsors by creating, building and strengthening innovative, evidence-based solutions to the many challenges we face in our efforts to create more lung cancer survivors.

We are grateful to the American Cancer Society and our corporate partners who make this critical work possible. Together with AbbVie, Amgen, AstraZeneca, Bristol-Myers Squibb, Daiichi-Sankyo, Foundation Medicine, Genentech, Gilead, Guardant Health, Janssen Pharmaceuticals, Merck, Novartis, Novocure, Regeneron, Sanofi-Genzyme, and Takeda, we all share the conviction that we can make a difference in the lives of individuals affected by lung cancer when we collaborate, bringing our unique strengths and perspectives to find solutions to complex problems.

We are here today with a sense of urgency to accelerate the uptake of lung cancer screening by working together. Thank you for being part of this effort!

Sincerely,




Ella A. Kazerooni, MD, MS
NLCRT Chair
University of Michigan



Carey C. Thomson, MD, MPH
Workshop Co-Chair
Mount Auburn Hospital
Beth Israel Lahey Health
Harvard Medical School



Debra S. Dyer, MD
Workshop Co-Chair
National Jewish Health



Tanner J. Caverly, MD, MPH
Workshop Co-Chair
University of Michigan

Meeting Agenda

MONTROSE BALLROOM

All activities take place in the Montrose Room, except for breakout sessions where noted.

7:00 AM – 7:30 AM

BREAKFAST & CHECK-IN

7:30 AM – 7:40 AM

GENERAL SESSION: Welcome and Overview

7:40 AM – 8:50 AM

GENERAL SESSION: Level-Setting Presentations

Moderator:

Ella A. Kazerooni, MD, MS, FACR, FACC, FSAB

Chair, National Lung Cancer Roundtable

Professor of Radiology

University of Michigan

Speakers:

Carey C. Thomson, MD, MPH, FCCP

Chair, Department of Medicine

Mount Auburn Hospital/Beth Israel Lahey Health

Associate Professor, Harvard Medical School

End to End Lung Cancer Screening Process Map

Neville Irani, MD

Assistant Professor, Radiology

University of Kansas Cancer Center

EMR/IT Lessons Learned from the ACR Lung Cancer Screening Learning Collaborative

Kensaku Kawamoto, MD, PhD, MHS, FACMI, FAMIA

Associate Chief Medical Information Officer

Professor and Vice Chair for Clinical Informatics, Department of Biomedical Informatics

University of Utah

Intersection of IT, Lung Cancer Screening Programs, Primary Care, and Patients

Peter J. Mazzone, MD, MPH

Director, Lung Cancer Screening Program, Respiratory Institute
Cleveland Clinic

Operational Quality Metrics

Christopher Slatore, MD, MS

Assistant Professor, Pulmonary and Critical Care Medicine
Portland VA Medical Center/Oregon Health and Sciences University

Clinical Outcome Metrics

Moderated Panel Q&A

8:50 AM – 9:00 AM

BREAK

9:00 AM – 10:30 AM

GENERAL SESSION: EHR Vendors Show and Tell

Moderator:

Carey C. Thomson, MD, MPH, FCCP

Speakers:

Aki Al-Zubaidi, DO, FCCP

Chief Executive Officer
EON

Gena Cook

Chief Executive Officer
Kaliper Health

Elton Hedden, RT(R)(CT)

Product Manager, Lung Cancer Orchestrator
Philips Healthcare

Brian Levy, MD

Lead Physician Executive
Oracle-Cerner

Mark Pilarski

Global Head of Product (Noona)
Varian Medical Systems – a Siemens-Healthineers Company

Shawn Regis, PhD

Director, Analytics and Clinical Quality Assurance
Thynk Health

Wayne Summers

Area Sales Manager, AI Precision Imaging Network
Microsoft

Jonathan Govette

Chief Executive Office
Oatmeal Health

George Yang

Software Engineer
Epic

Moderated Panel Q&A

10:30 AM – 10:45 AM

**GENERAL SESSION: Introduction to the Breakout Group Process
Overview of Breakout #1 and Travel to Breakout Rooms**

Moderator:

Carey C. Thomson, MD, MPH, FCCP

10:45 AM – 12:00 PM

BREAKOUT SESSION #1: Review Strategies and Brainstorm Tactics

Identifying Individuals Eligible for Lung Cancer Screening (Montrose Upper)

Greta Branford, MD

Assistant Professor, Internal Medicine/Pediatrics
UMMG Associate Medical Director for Healthcare IT
University of Michigan

Nichole T. Tanner, MD, MSCR, FCCP

Professor, College of Medicine
Medical University of South Carolina

Patient Tracking After Lung Cancer Screening (Montrose Lower)

Debra S. Dyer, MD, FACR

Chair, Department of Radiology
National Jewish Health

Christopher Slatore, MD, MS

Assistant Professor, Pulmonary and Critical Care
Medicine, Portland VA Medical Center
Oregon Health and Sciences University

Education for Patients, Including Shared Decision Making (Tate)

Tanner Caverly, MD, MPH

Assistant Professor, Internal Medicine
University of Michigan

Joelle T. Fathi, DNP, RN, ARNP, CTTS, FAAN

Chief Healthcare Delivery Officer
GO2 for Lung Cancer

Key Performance Indicators and Quality Measure Dashboard (Metropolitan)

Peter J. Mazzone, MD, MPH, FCCP

Director, Lung Cancer Screening Program
Cleveland Clinic

Neville Irani, MD

Assistant Professor, Radiology
University of Kansas Cancer Center

12:00 PM – 1:00 PM

WORKING LUNCH

GENERAL SESSION: Report Outs from Breakout #1

Moderator:

Debra S. Dyer, MD, FACR

Chair, Department of Radiology
National Jewish Health

1:00 PM – 1:15 PM

GENERAL SESSION: Overview of Breakout #2 and Travel to Rooms

Moderator:

Debra S. Dyer, MD, FACR

1:15 PM – 2:45 PM

BREAKOUT SESSION #2: Refining Tactics & Assessing Feasibility

Identifying Individuals Eligible for Lung Cancer Screening (Montrose Upper)

Greta Branford, MD

Assistant Professor, Internal Medicine/Pediatrics
UMMG Associate Medical Director for Healthcare IT
University of Michigan

Nichole T. Tanner, MD, MSCR, FCCP

Professor, College of Medicine
Medical University of South Carolina

Patient Tracking After Lung Cancer Screening (Montrose Lower)

Debra S. Dyer, MD, FACR

Chair, Department of Radiology
National Jewish Health

Christopher Slatore, MD, MS

Assistant Professor, Pulmonary and Critical Care
Medicine, Portland VA Medical Center
Oregon Health and Sciences University

Education for Patients, Including Shared Decision Making (Tate)

Tanner Caverly, MD, MPH

Assistant Professor, Internal Medicine
University of Michigan

Joelle T. Fathi, DNP, RN, ARNP, CTTS, FAAN

Chief Healthcare Delivery Officer
GO2 for Lung Cancer

Key Performance Indicators and Quality Measure Dashboard (Metropolitan)

Peter J. Mazzone, MD, MPH, FCCP

Director, Lung Cancer Screening Program
Cleveland Clinic

Neville Irani, MD

Assistant Professor, Radiology
University of Kansas Cancer Center

2:45 – 3:00 PM

BREAK AND TRAVEL BACK TO GENERAL SESSION ROOM

3:00 PM – 3:50 PM

GENERAL SESSION: Report Outs from Breakout #2 and Voting

Moderator:

Tanner Caverly, MD, MPH

Assistant Professor, Internal Medicine
University of Michigan

3:50 PM – 4:00 PM

GENERAL SESSION: NEXT STEPS AND CLOSING

Ella A. Kazerooni, MD, MS, FACR, FACC, FSAB

Chair, National Lung Cancer Roundtable
Professor of Radiology
University of Michigan

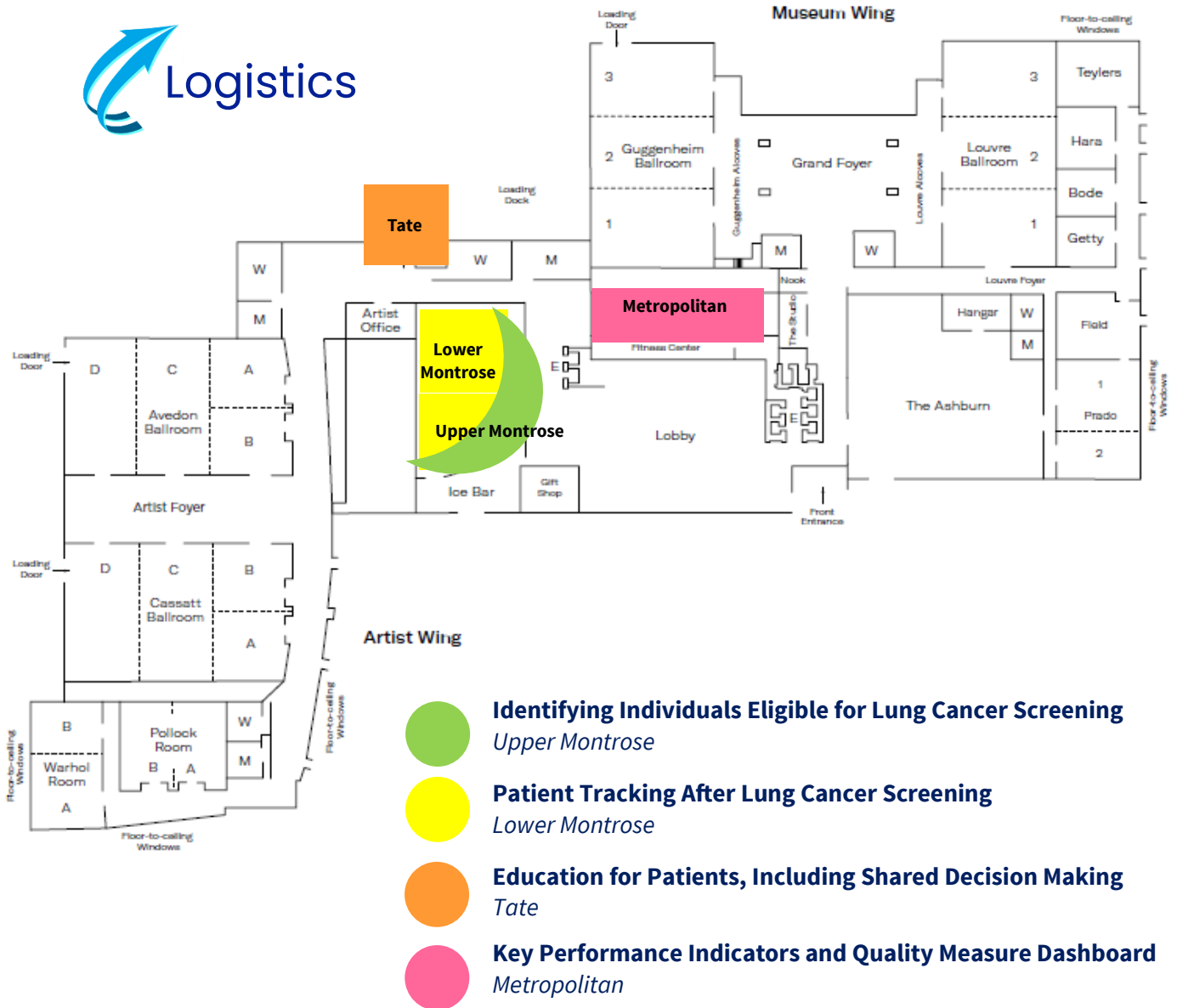
SLIDO

We will be using Slido, an interactive tool that will allow everyone a voice in the prioritization of future work. To use Slido:

Scan the QR code, which will take you to the ACS NLCRT workshop poll.



Breakout Sessions



- Identifying Individuals Eligible for Lung Cancer Screening**
Upper Montrose
- Patient Tracking After Lung Cancer Screening**
Lower Montrose
- Education for Patients, Including Shared Decision Making**
Tate
- Key Performance Indicators and Quality Measure Dashboard**
Metropolitan



Breakout Assignments

Identifying Individuals Eligible for Lung Cancer Screening (Upper Montrose)



Greta Branford, MD

Asst Professor, Internal Medicine/Pediatrics
UMMG Associate Medical Director for
Healthcare IT
University of Michigan

Nichole T. Tanner, MD, MSCR

Professor, College of Medicine
Medical University of South Carolina

Note Taker: Caleb Levell, American Cancer Society

Taylor Doyle	Michelle Futrell	Mirya Morris	Lori Sakoda
Jan Eberth	Michael Gieske	Timothy Mullett	Kim Sandler
Mary Elmer	Brian Levy	Mary Pasquinelli	Aubree Thelen
Cherie Erkmen	Lauren Liggett	Albert Rizzo	Denise Wojcik

Patient Tracking After Lung Cancer Screening (Lower Montrose)



Debra Dyer, MD

Chair, Department of Radiology
National Jewish Health

Christopher Slatore, MD, MS

Asst Prof, Pulmonary & Critical Care
Medicine
Portland VA Medical Center/Oregon Health &
Science University

Note Taker: Kaitlyn Keen, American Cancer Society

Akrum Al-Zubaidi	Heather Ciccarelli	Nadia Haque	Michelle Vislosky
Doug Arenberg	Gena Cook	Eric Hart	Doug Wood
Kimberly Bathurst	Christina Day	Mark Pilarski	George Yang
Vickie Beckler	Grant Greenberg	Carey Thomson	
Michelle Chappell			

Education For Patients Including Shared Decision Making (Tate)



Tanner Caverly, MD, MPH

Assistant Professor, Internal Medicine
University of Michigan

Joelle T. Fathi, DNP, RN, ARNP, CTTS

Chief Healthcare Delivery Officer
GO2 for Lung Cancer

Note Taker: Olivia Klein, Ohlander Consulting

Lisa Carter-Bawa	Kevin Kao	Christopher Pena	Betty Tong
Thomas-Glyn Cox	Kensaku Kawamoto	Carolyn Richards	Courtnee VanOrd
Angela Criswell	Stephen Murray	Sarah Shafir	Rebekah Werner
Gissoo DeCotiis	Elyse Park	Geoff Steinbeck	
Cosmina Hoge			

Key Performance Indicators & Quality Measure Dashboard (Metropolitan)



Peter J. Mazzone, MD, MPH

Director, Lung Cancer Program,
Respiratory Institute
Cleveland Clinic

Neville Irani, MD

Assistant Professor, Radiology
University of Kansas Cancer Center

Note Taker: Megan Burns, American Cancer Society

Devon Adams	Alexander Coates	Ella Kazerooni	Wayne Summers
Julie Barta	Ellen Friend	Armin Lahiji	Jeffrey Velotta
Judy Burlison	Jonathan Govette	Shawn Regis	Karen Wernli
Nabil Chehab	Elton Hedden	Ray Osarogiagbon	Pearlann Zelarney
John Christensen			

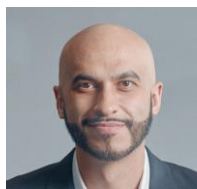


Screening Summit IT & EHR Breakout Summary

The table below summarizes the work of the IT & EHR Systems breakout group during the July 2022 *Accelerating the Uptake of Lung Cancer Screening Summit* (Executive Summary: http://nlcrt.org/wp-content/uploads/NLCRT-2022-LCS-Summit_Exec-Summary_Final.pdf). First, the group brainstormed barriers presented by IT & EHR systems. They then developed a set of strategies to address those challenges. Finally, with input from the Summit participants, and using a feasibility matrix, the breakout group developed and prioritized a list of strategies in the form of subsequent ACS NLCRT projects and initiatives.

Group 3 – Information Technology (IT) and Electronic Health Records (EHR) Systems	
Participants	
Tanner Caverly, MD, MPH Assistant Professor, Internal Medicine University of Michigan	Carey C. Thomson, MD, MPH, FCCP Chair, Department of Medicine Mount Auburn Hospital/Beth Israel Lahey Health
Hannah Burson (Facilitator) American Cancer Society	
<ul style="list-style-type: none"> Julie Barta, MD, ATSF, Thomas Jefferson University Maiyan Chau, PhD, AstraZeneca Ilya Gipp, MD, PhD, Philips Hormuzd Katki, PhD, MS, National Cancer Institute Jane Kim, MD, MPH, Department of Veterans Affairs Yamile Leon, RN, MSN, OCN, ONN-CG, ONN-CG(T), Academy of Oncology Nurse & Patient Navigators Philip Linden, MD, FACS, FCCP, University Hospitals Cleveland Medical Center 	<ul style="list-style-type: none"> Conan Noronha, MS, Epic Jamie Ostroff, PhD, Memorial Sloan Kettering Cancer Center Mary Pasquinelli, DNP, APRN, FNP-BC, University of Illinois - Chicago Angela Rolle, MPH, American Cancer Society Jonathan Sepulveda, Epic Charles White, MD, FACR, University of Maryland David Yankelevitz, MD, Icahn School of Medicine at Mount Sinai
Barriers and Challenges	
<ul style="list-style-type: none"> Inconsistency and misclassification of current and former tobacco use status Suboptimal use of data; questions could be worded better; validated prediction models IT and operations disconnect EHRs are not designed to incorporate clinic decision support tools Information overload problem – for providers and patients Poor use of EHR systems to support adherence to screening Patients not using EHR patient portals to access information 	
Initial Strategies	Refined Strategies
<ul style="list-style-type: none"> Develop a national consensus for an LCS module across vendors Leveraging the EHR to engage patients; LCS education, collecting tobacco history, telemedicine Build IT systems for building future predictors (radiomics, biomarkers, tobacco treatment) Training healthcare workers to collect detailed tobacco use history Utilizing best practice alerts (BPA) 	<ul style="list-style-type: none"> National consensus on developing core EHR elements and standards (tobacco history, data sharing, best practice alerts (BPA), quality, risk models, communication, program orders, education for healthcare workers, patients, and providers) Develop a Lung Cancer Screening Quality Standards Act in collaboration with the NLCRT Policy Action Task Group Leverage EHR to engage and educate patients about lung cancer screening and collect appropriate tobacco use history

Speaker and Facilitator Biosketches



Akrum Al-Zubaidi, DO

Dr. Al-Zubaidi, Eon Founder & CEO, is an Interventional Pulmonologist who founded Eon in 2015 to solve a clinical problem he experienced first-hand – lung cancer was most often diagnosed at a late stage where the likelihood of survival was low. He knew that by tracking patients with lung nodules found early on regular radiology exams, he could diagnose lung cancer at earlier stages. And so he dedicated his career to pulmonary nodule management, practicing at National Jewish Health, the number one respiratory hospital in the world. Aki loved his patients and the impact he had on them, but knew there was a way to help patients on a macro level, and imagined a world where every patient across the globe received adherent follow-up for incidentally detected findings. He set out to build a technologically advanced system that would ultimately lead to earlier diagnosis for the most fatal diseases. Today, Eon is the leading solution for lung cancer screening and incidental findings and has touched over 1MM patients across 600 facilities around the country.



Greta Branford, MD

Dr. Branford is a practicing MedPeds primary care physician and has been at Michigan Medicine for 18 years. For the past 7 years, she has also assumed the administrative roles of Associate Chief Medical Information Officer, and Assistant Medical Director for Healthcare IT within the Medical Group. In these roles she works on many aspects of their Epic EHR, including clinical decision support, population health and quality metrics decision support, efficiency programs, in basket management, HCC coding improvement. In her spare time, she enjoys spending time with her husband (and dogs and cats), visiting her two daughters at college, gardening or tackling home improvement projects.



Tanner Caverly, MD, MPH

Dr. Caverly is an Assistant Professor of Learning Health Sciences and Internal Medicine at the University of Michigan. He studies the delivery of high-value care in primary care settings. His interests include medical decision making and cancer screening and prevention.



Gena Cook

Ms. Cook is the Founder and CEO of Kaliper Health, a human and AI assisted lung health care collaboration platform. Gena is an experienced global CEO, entrepreneur, and board member passionate about launching, growing, and advising healthcare companies that improve patient care and outcomes and make care more efficient. Gena's extensive experience extends from founding Navigating Cancer, a patient and care coordination platform used 30% cancer centers to succeed in value-based care and engage patients in their care to managing a \$3.5B P&L at OTN / McKesson Specialty Health. Gena is the chair of the National Comprehensive Cancer Network (NCCN) Foundation and serves as a board member for Blue Note Therapeutics and Portalus.



Debra Dyer, MD

Dr. Dyer is a fellowship trained cardiothoracic radiologist and Professor of Diagnostic Radiology at National Jewish Health, a chronic respiratory disease hospital in Denver. Throughout her career, Dr. Dyer has been committed to Quality Improvement in Diagnostic Radiology. She has implemented

imaging and lung nodule management and was instrumental in the creation of the National Jewish Health Lung Nodule Registry, the first of its kind in the US. She is Medical Director of the Lung Cancer Screening Program at National Jewish Health and is the Immediate Past Chair of the ACR Lung Cancer Screening Steering Committee. Dr. Dyer is Co-Chair of the Colorado Lung Cancer Task Force of the Colorado Cancer Coalition. She is the Vice Chair of the ACS NLCRT's Early Detection Implementation Strategies Task Group.

Joelle T. Fathi, DNP, RN, ARNP, CTTS, FAAN

Dr. Fathi is GO2 for Lung Cancer's Chief Healthcare Delivery Officer, with responsibility for expanding excellence and access to high-quality care across the lung cancer care continuum in communities nationwide, including the GO2 for Lung Cancer Centers of Excellence. A board-certified and practicing nurse practitioner, Dr. Fathi has 30 years of experience in direct clinical care, including the lung screening and cancer care continuum. She has a track record of leading multi-disciplinary teams to produce change in health systems and outcomes for patients and communities. She is a Fellow of the American Academy of Nursing for her contributions to improving health and achieving health equity by



Jonathan Govette

Jonathan Govette, CEO and founder of Oatmeal Health, is recognized as a leader in the industry with his strong background in engineering, partnerships, and product development. Oatmeal Health is a tech-enabled clinical cancer screening service dedicated to serving marginalized communities and demonstrates his commitment to addressing healthcare disparities.



Jonathan has received numerous accolades and honors. Notably, he was honored as the winner of Samsung's Digital Health Conference and as a finalist at VentureBeat's Health Beat Conference. He has developed impactful partnerships and collaborations with esteemed institutions such as Cleveland Clinic, Harvard Medical, and AARP, as well as companies like Amazon, Bronx Partners, and El Rio Health.

Elton Hedden, R.T. (R)(CT)

Mr. Hedden, a retired US Navy Hospital Corpsman has been with Philips for 10 years. He has a passion for playing the guitar and learning about new medical technology, and resides in San Diego. Elton has been with Philips for 10 years as a clinical applications specialist, Product Manager and now Solutions Leader. Experienced in program implementation, product development and clinical workflow optimization. Elton is a prior Lead CT Technologist and Radiology supervisor specialized in Low Dose Chest CT's, gated/non-gated Cardiac studies, and Dual Energy Neurovascular imaging.



Neville Irani, MD

Dr. Irani received his MD at UNC-Chapel Hill. He is a board-certified Radiologist with a Certificate of Added Qualification (CAQ) in Pediatric Radiology. He is a research associate professor at the University of Kansas and served as Vice-Chair of Quality and Informatics until 2020 when he stepped down to start the Healthcare Quality Improvement Platform, a Public Charity focused on improving patient experience and outcomes. He is the chair of the Non-interpretive Skill Committee for the American Board of Radiology. As a thought leader in lung cancer screening, he also serves as the physician leader of the National Lung Cancer Screening Collaborative for the American College of Radiology.





Kensaku Kawamoto, MD, PhD, MHS

Dr. Kawamoto is Professor of Biomedical Informatics at the University of Utah. He is also Associate Chief Medical Information Officer and Director of the ReImagine EHR initiative, which is a multi-stakeholder initiative to improve patient care the provider experience through interoperable EHR apps that convert data to actionable insight.



Ella A. Kazerooni, MD, MS

Dr. Kazerooni is Chair of the ACS NLCRT and Professor of Radiology & Internal Medicine, Associate Chair for Clinical Affairs & Director of Cardiothoracic Radiology at the University of Michigan / Michigan Medicine. She is the vice Chair of the NCCN Lung Cancer Screening panel, and chairs both the ACR Committee on Lung Cancer Screening, and ACR's Lung Cancer Screening Registry (LCSR).



Brian Levy, MD

Dr. Levy is an Executive Healthcare Physician with deep expertise in creating software and content. He is passionate about improving the delivery of healthcare for patients, improving their outcomes, and achieving semantic interoperability of their records. As the Lead Physician Executive with Oracle Cerner, he works with the VA and DoD on interoperability and terminology. He continues to practice Telemedicine, using the latest technology in delivering every day patient care.



Peter J. Mazzone, MD, MPH

Dr. Mazzone is a pulmonologist at the Cleveland Clinic where he directs the Lung Cancer Program for the Respiratory Institute and the Lung Cancer Screening Program for the hospital system. His clinical interests include prevention, screening, nodule management, lung cancer diagnosis, staging, and characterization. He has served in positions within CHEST, ATS, and NLCRT that have allowed him to lead policy development projects related to quality metrics for the evaluation of lung cancer and components necessary for high-quality lung cancer screening. He has been an active member of evidence-based guidelines related to lung cancer screening and lung nodule management.



Mark Pilarski

Mr. Pilarski has over 35 years of healthcare IT experience, with a concentration in the clinical domains. Mark brings experiences relevant to large health care systems, large software vendors, Private Equity funded companies, Joint Venture initiatives, and start-up (both external and large company internal startups). He has deep experience in software development, product management, product strategy, UX centered design, analytics, as well as client advisory.



Shawn Regis, PhD

Dr. Regis is the Director of Analytics and Clinical Quality Assurance at Thynk Health. He is a coauthor of the ALA/ATS Lung Screening Implementation Guide and the MA Statewide 2017-2021 Cancer Plan and was a member of the advisory committee for an ACCC initiative to develop an optimal care coordination model for lung cancer patients with Medicaid. Shawn is a coauthor on 20+ manuscripts

and has presented nationally and internationally on various LCS topics, He is a founding member and Board Chair of the Rescue Lung Society, a multidisciplinary, caregiver-driven, 501(c)(3) organization.

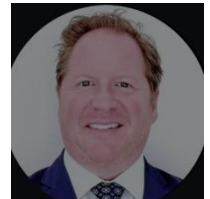
Christopher Slatore, MD, MS

Dr. Slatore is associate professor of pulmonary and critical care medicine, Portland VA Medical Center/Oregon Health and Sciences University. He is interested in the prevention, detection, treatment, and healthcare delivery for patients with tobacco-related lung diseases, chiefly lung cancer. His research has focused on improving patient outcomes and identifying innovative approaches to treatment in these areas, in particular, how patient-clinician communication strategies are associated with patient-centered outcomes. Through the application of comparative research methodologies, he hopes to improve healthcare quality for patients with tobacco-related lung diseases.



Wayne Summers

Mr. Summers is a trailblazing innovator at the intersection of medicine and artificial intelligence. His remarkable journey in the realm of medical imaging has transformed the landscape of healthcare in profound ways. Wayne's pioneering work includes early breakthroughs in lung navigation and the first developments of lung cancer screening programs.



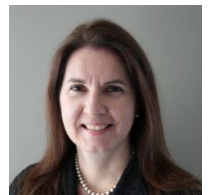
Nichole T. Tanner, MD, MSCR

Dr. Tanner is a pulmonary critical care physician at the Ralph H. Johnson VA Medical Center in Charleston, SC. She leads the lung cancer screening program and conducts all advanced and interventional pulmonary procedures. She has a joint appointment as a Professor of Medicine at the Medical University of South Carolina where she co-directs the Lung Cancer Screening Program at the NCI-designated Hollings Cancer Center. Her research interests span the lung cancer continuum: lung cancer screening implementation and adherence, biomarkers for early detection and pulmonary nodule evaluation, and evaluation of technology for diagnosis.



Carey C. Thomson, MD, MPH

Dr. Thomson is Chair, Department of Medicine, at Mount Auburn Hospital/Beth Israel Lahey Health in Cambridge, where she is Associate Professor at Harvard Medical School. She is involved in leading efforts to improve programs to increase the detection of early-stage lung cancer through both lung cancer screening and lung nodule pathways. She has a strong interest in technology and clinical navigation to impact these efforts.



George Yang

Mr. Yang is a lead software developer for Epic's lung cancer screening and incidental findings functionality.



Attendees

Devon Adams, MPH, RN

ACS CAN
devon.adams@cancer.org

Akrum Al-Zubaidi, DO

Eon
aki.alzubaidi@eonhealth.com

Doug Arenberg, MD

University of Michigan
darenber@umich.edu

Julie Barta, MD

Thomas Jefferson University
julie.barta@jefferson.edu

Kimberly Bathurst, R. T(R)(M)

RadNet
kimberly.bathurst@radnet.com

Vickie Beckler, MBA, RN

AstraZeneca
vickie.beckler@astrazeneca.com

Greta Branford, MD

Michigan Medicine
gretab@med.umich.edu

Judy Burleson, MHSA

American College of Radiology
jburleson@acr.org

Kenly Burn

ACS NLCRT
kenly.burn@cancer.org

Megan Burns

American Cancer Society
Megan.Burns@cancer.org

Lisa Carter-Bawa, PhD, MPH, APRN, ANP-C

Center for Discovery & Innovation @ Hackensack Meridian Health
lisa.carterbawa@hnh-cdi.org

Sabrina Cauton

Epic
scauton@epic.com

Tanner Caverly, MD, MPH

University of Michigan
tcaverly@med.umich.edu

Michelle Chappell

National Navigation Roundtable
michelle.chappell@cancer.org

Nabil Chehab, PhD, MBA

AstraZeneca
nabil.chehab@astrazeneca.com

John Christensen

Epic
jchrste@epic.com

Heather Ciccarelli, MSW, OPN-CG

American Cancer Society
heather.ciccarelli@cancer.org

Alexander Coates

Epic
acoates@epic.com

Gena Cook

Kaliper Health
genapcook@gmail.com

Thomas-Glyn Cox

Epic Systems
mjbasey@gmail.com

Angela Criswell, MA

GO2 for Lung Cancer
acriswell@go2.org

Gissoo DeCotiis, MBA

Daiichi Sankyo, Inc.
gdecotiis@dsi.com

Christina Day, MPH

AbbVie
christina.day@abbvie.com

Taylor Doyle

Epic
tdoyle@epic.com

Debra Dyer, MD

National Jewish Health & ACR
debradyer1@comcast.net

Jan Eberth, PhD

Drexel University
jme336@drexel.edu

Mary Elmer, MSN, CRNP

Merck
mary_elmer@merck.com

Cherie Erkmen, MD

Temple University
Cherie.Erkmen@tuhs.temple.edu

Joelle Fathi DNP, RN, ARNP

Go2 for Lung Cancer
jfathi@go2.org

Ellen Friend, MS

Merck
ellen_friend@merck.com

Michelle Futrell MSN, MBA, RN

LUNGevity Foundation
mlfutrell75@gmail.com

Michael Gieske, MD

St. Elizabeth HealthCare
michael.gieske@stelizabeth.com

Jonathan Govette

Oatmeal Health
Jonathan@oatmealhealth.com

Grant Greenberg, MD, MHSA, MA

Lehigh Valley Health Network
Grant.Greenberg@lvhn.org

Nadia Haque, PhD

Genentech
haquen@gene.com

Eric Hart, MD

Northwestern University
ehart@nm.org

Elton Hedden, R.T.(R)(CT)

Philips
elton.hedden@philips.com

Cosmina Hogeia, PhD

Gilead Sciences
Cosmina.Hogeia@gilead.com

Neville Irani, MD

University Kansas Medical Center
nirani@kumc.edu

Kevin Kao, PharmD
Bristol Myers Squibb
Kevin.Kao@bms.com

Kensaku Kawamoto, MD, PhD, MHS
University of Utah
kensaku.kawamoto@utah.edu

Ella Kazerooni, MD, MS
Michigan Medicine
ellakaz@med.umich.edu

Kaitlyn Keen, MPH
American Cancer Society
kaitlyn.keen@cancer.org

Olivia Klein
Ohlander Consulting Services
oliviabklein@gmail.com

Armin Lahiji, PhD
Bristol Myers Squibb
Armin.Lahiji@bms.com

Caleb Levell, MA
American Cancer Society
caleb.levell@cancer.org

Brian Levy, MD
Oracle Cerner
brianlmd@yahoo.com

Lauren Liggett
Sanofi
Lauren.Liggett@Sanofi.com

Peter Mazzone, MD, MPH
Cleveland Clinic
mazzonp@ccf.org

Mirya Morris
Bristol Myers Squibb
miryah.morris@bms.com

Timothy Mullett, MD, MBA
University of Kentucky Markey
Cancer Center
timothy.mullett@uky.edu

Stephen Murray, PhD
Epic Software Systems
smurray@epic.com

Kerstin Ohlander
Ohlander Consulting
kohlander@ocsconsult.com

Raymond Osarogiagbon, MBBS
Baptist Cancer Center
Raymond.Osarogiagbon@bmg.md

Elyse Park, PhD, MPH
Mass General Hospital
epark@mgh.harvard.edu

Mary Pasquinelli, APRN, FNP-BC
University of Illinois
mpasqu3@uic.edu

Christopher Peña, PhD
American Cancer Society
christopher.pena@cancer.org

Mark Pilarski
Varian Medical Systems
mark.pilarski@varian.com

Shawn Regis, PhD
THYNK Health
Shawn.regis@THYNKHEALTH.com

Carolyn Richards
Janssen Biotech
CRichar9@its.jnj.com

Albert Rizzo, MD
American Lung Association
albert.rizzo@lung.org

Lauren Rosenthal, MPH
ACS NLCRT
lauren.rosenthal@cancer.org

Lori Sakoda, PhD, MPH
Kaiser Permanente Northern CA
lori.sakoda@kp.org

Kim Sandler, MD
Vanderbilt University Medical Ctr
kim.sandler@vumc.org

Sarah Shafir, MPH
American Cancer Society
Sarah.Shafir@cancer.org

Christopher Slatore, MD, MS
Veterans Health Administration,
National Center for Lung Cancer
Screening
slatore@ohsu.edu

Geoffrey Steinbeck, MBA
Medtronic
geoffrey.p.steinbeck@medtronic.com

Wayne Summers
Microsoft
waynesummers@microsoft.com

Nichole Tanner, MD, MSCR
Ralph H. Johnson VAMC
tripici@musc.edu

Aubree Thelen
ACS National CRC Roundtable
aubree.thelen@cancer.org

Carey Thomson, MD, MPH
Mount Auburn Hospital/BI Lahey
Health, Harvard Medical School
cthompson@mah.harvard.edu

Betty Tong, MD, MHS, MS
Duke University Medical Center
betty.tong@duke.edu

Courtnee VanOrd
ACS NRTCC
Courtnee.vanord@cancer.org

Jeffrey Velotta, MD
Kaiser Permanente Northern CA
jeffrey.b.velotta@kp.org

Michelle Vislosky, MBA
Philips Healthcare
michelle.vislosky@philips.com

Rebekah Werner
Novocure
rwerner@Novocure.com

Karen Wernli, PhD, MS
Kaiser Permanente Washington
Health Research Institute
karen.j.wernli@kp.org

Denise Wojcik, RN, BSN
Northwestern University
Denise.wojcik@nm.org

Douglas Wood, MD
University of Washington
Dewood@uw.edu

George Yang
Epic
geyang@epic.com

Pearlanne Zelarney, MS
National Jewish Health
zelarney@njhealth.org

ACS NLCRT Strategic Priority: Accelerate Uptake of

Successful lung cancer screening is a cascade of interrelated priorities and events that represent unique challenges compared with screening for breast or colorectal cancer. These include an overstressed primary care system that needs to add a new preventive care intervention; the need to identify eligible patients based on age and pack-year history with technical support from electronic health records; the offer of tobacco treatment for adults who smoke; and the requirement to raise awareness about lung cancer screening and conduct shared decision making. A referral to lung cancer screening, and management of findings, will result in either a normal finding and the need to return for annual repeat screening, the need for short-term follow-up, evaluation of incidental findings, or a diagnosis of lung cancer. This level of complexity in the introduction of a new cancer screening test in large part accounts for the slow uptake of lung cancer screening to date. Thus, the ACS NLCRT is focused on building capacity at the national and state levels to promote strategies and tools intended to increase uptake of lung cancer screening.

National Lung Cancer Screening Day

As a follow-up to its 2022 success, the ACS NLCRT is partnering with the American College of Radiology, Radiology Health Equity Coalition, GO2 for Lung Cancer, and the Department of Veterans Affairs for the second annual National Lung Cancer Screening Day (“National LCS Day”), on Saturday, November 11, 2023.

Last year's inaugural effort saw over 300 facilities across the US open their doors for lung cancer screening. Currently, 500 facilities have pledged to provide lung cancer screening for patients on National LCS Day, with six weeks remaining to register.

National LCS Day leverages the public's interest during November's Lung Cancer Awareness Month to emphasize the life-saving role of lung cancer screening in diagnosing lung cancer. The annual initiative seeks to increase screening both by providing access for patients who cannot take time off during their weekday schedules and creating awareness of this screening modality. Promotional and marketing tools are available for participating facilities, and a Presidential Proclamation by President Biden will be shared with the nation. The hope is that a facility's success on National LCS Day will motivate centers to host regular (weekly or monthly) Saturday hours for their patients to be screened.

LungPLAN® Resource Planning Tool

LungPLAN® is a free financial planning tool that helps healthcare professionals, financial experts, and administrators model implementation costs and outcomes to demonstrate downstream value of a lung cancer early detection program (screening and nodule detection and management), thereby ensuring these programs are successful and tailored to their patient population. It can be used to build new lung cancer early detection programs, as well as strengthen and expand existing programs for different types of facilities.

LungPLAN was created by a team of ACS NLCRT clinical, navigation, health system, and financial experts, and was field-tested by health systems. It provides a framework for predicting lung cancer screening and nodule management program costs, resources, staffing, volume, and revenue. The return on investment modeling tool is based on current evidence, including data from the American College of Radiology Lung CT Screening Reporting & Data System (LUNG-RADS) and the Lung Cancer Screening Registry.

Learn more about these and other initiatives at [NLCRT.org](https://www.nlcrt.org).

Lung Cancer Screening

The ACS NLCRT was recommended by the 2022 President's Cancer Panel as a priority cancer control model that has the knowledge and credibility to effectively address the complexities presented by lung cancer screening. We harness the collective power and expertise of the entire lung cancer community to close gaps in cancer screening by connecting people, communities, and systems to improve equity and access. Through its multidimensional and multisectoral approach, the ACS NLCRT stimulates multidisciplinary collaborations to reduce lung cancer mortality through actions aligned to its strategic priorities.

The July 2022 Summit, *Accelerating the Uptake of Lung Cancer Screening – a National Initiative*, brought together thought leaders across the lung cancer screening continuum to develop a comprehensive and cohesive plan for addressing the low rate of lung cancer screening in the United States. The top strategy ranked by the Summit participants was to develop and standardize core EHR elements and best practices to accelerate uptake of lung cancer screening, optimize patient management, and improve quality measures.

Lung Cancer Screening HEDIS Measure

The ACS NLCRT is partnering with the American Lung Association and the National Committee for Quality Assurance (NCQA) to develop a lung cancer screening HEDIS measure.

HEDIS (Healthcare Effectiveness Data and Information Set) is a tool that measures the quality of care patients receive through a series of indicators. The primary goal of this initiative is to develop an evidence-based, reliable, and valid lung cancer screening measure that is suitable for use in multiple care settings. It is used to compare health plans, and track quality improvements in a specific health system. This measure will help payers and providers steer a greater number of eligible individuals to lung cancer screening, facilitate early detection, and reduce the number of deaths attributable to lung cancer.

Professional Education Tools: Decision Aids and Primary Care Professional Resources

The ACS NLCRT is working with the American Academy of Family Physicians and MD Anderson Cancer Center to develop tools that will support PCPs in meeting the challenges of lung cancer screening. Initiatives include producing an environmental scan of existing decision aids, conducting an AAFP member survey and interviews to assess knowledge and practice, and developing and field testing decision aids for various patient populations.

State-Based Initiatives (SBI) Planning Tool

Building and strengthening local initiatives led by a multidisciplinary team of partners is a critical strategy for reducing lung cancer mortality. Our goals in creating this tool were to create a formula to help build initiatives and coalitions that could be tailored to the unique needs of each state and encourage common goals with the understanding that approaches will depend on existing initiatives, resources, and partner engagement.

The web- and PDF-based SBI Planning Tool is an easy-to-follow roadmap for building these efforts and can be tailored to each user regardless of their experience with coalitions or lung cancer expertise. It provides for flexible navigation, allowing users to explore approaches to identify partners, priorities, goals, and strategies that ensure alignment in focus and direction. It also shares field-tested strategies to overcome common obstacles, providing worksheets and useful references. Its intended audience is wide-ranging – from clinicians, health systems, public health partners, and advocacy organizations who want to work together, leveraging collective action to improve lung cancer risk reduction, early detection, and care services across the nation.



**NATIONAL
LUNG CANCER
ROUNDTABLE**