

Dermatology Coding Alert

You Be the Coder: Skin Cancer Screening

Question: My dermatologist sees a patient for a skin cancer screening. Should I use the preventive medicine service codes?

Florida Subscriber

Answer: Since most insurances do not recognize preventive skin cancer screenings, using CPT® 99203 (Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: a detailed history; a detailed examination; medical decision making of low complexity ...) or 99213 (Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity ...) with V76.43 (Special screening for malignant neoplasms; skin) would be more appropriate than using preventive medicine service codes (99381-99397).

Important: Always select the E/M level based on actual documentation in the medical record. These visits can vary greatly depending on the patient's sun exposure, family history, and number of existing nevi/lesions.

When reporting preventive medicine service codes (99381-99397), CPT® states, "If an abnormality/ies is encountered or a preexisting problem is addressed in the process of performing this preventive medicine evaluation and management service, and if the problem/abnormality is significant enough to require additional work to perform the key components of a problem oriented E/M service, then the appropriate office/outpatient code 99201-99215 should also be reported."

Much better: If the patient has no history of skin cancer, look for other V codes that would be more suitable, like V13.3 (Personal history of disease of skin and subcutaneous tissue). Otherwise, you risk it getting rejected by payers.