

adha 94TH ANNUAL
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CE Course Handout

Is Your Office Providing the Right Oral Cancer Screening?

June 16th, 2017



American
Dental
Hygienists'
Association

Is your Office Providing the Right Oral Cancer Exam?

Resource List

Professional and Patient websites:

Oral Cancer Foundation: www.oralcancerfoundation.org

Six Step Screening: <http://www.sixstepscreening.org/>

Medical History Updated Questions: See more at: http://oralcancer.org/discovery-diagnosis/how_do_you_know.php#sthash.4ebGYBSZ.dpuf

1. Have you noticed any changes in swallowing?
2. Do things seem to stick or catch in your throat when you swallow?
3. Have you had any chronic hoarseness (a condition that has lasted for over two weeks)
4. Have you noticed/felt any small lumps when feeling the side of your neck putting on makeup or shaving? (Painful swollen nodes are usually a sign of an infection not cancer--painless ones are the red flags).
5. Have you had any ear aches that seem to persist, particularly unilateral (only on one side)?
6. Have you or any of your friends noticed a change in your voice?
7. Have you (or your kids) been vaccinated against HPV?
8. Have you or your family had a history of head and neck cancer?

HVP Conversations:

"HVP is the fast growing sexually transmitted virus in America. Most adults have had a HVP infection at some point in their life. Most people can clear the virus, but in some cases, the virus cannot be cleared. There are over 200 strains of HVP. If you have HPV, we are particularly concerned with the strain #18 as it can put you at high risk for Oral Cancer."

Conversation regarding the physical head and neck exam and use of adjuncts:

1. "We have always screened the soft tissues as part of your routine check-up."
2. "We are now working to increase your own awareness of the importance of oral cancer screening."
3. "Evidence suggests that the incidence of oral cancer is increasing and we believe we should be taking a more active role in increasing your awareness of the importance of complete oral health and oral cancer screening."
4. "We need to keep more detailed records, including information about your lifestyle, so that we can offer you a more comprehensive oral health care service."
5. "We are extending the range of healthcare provided at this practice."

Procedure	ADA/CDT Code	AMA CODE	Average Fee*	DESCRIPTION
Oral Cancer Screening	D0431	82397	\$32	OralID and like tests
Biopsy (Hard Tissue)	D7285	20220	\$550	Hard Biopsy, muscle/superficial
	D7285	20240	\$650	Hard Biopsy, bone/excisional/superficial
	D7285	20245	\$850	Hard Biopsy, bone/excisional/deep
Biopsy (Soft Tissue)	D7286	20200	\$250	Soft Biopsy, muscle/superficial
	D7286	20205	\$250	Soft Biopsy, muscle/deep
	D7286	40490	\$250	Soft Biopsy, lip
	D7286	40808	\$300	Soft Biopsy, vestibule of mouth
	D7286	41100	\$300	Soft Biopsy, tongue, anterior two-thirds
	D7286	41105	\$375	Soft Biopsy, tongue, posterior one-third
	D7286	41108	\$375	Soft Biopsy, floor of mouth
	D7286	42100	\$375	Soft Biopsy, palate, uvula
	D7286	42800	\$375	Soft Biopsy, oropharynx
Cytology	D7287	88104	\$190**	Cytopathology of fluids, washings or brushings. (CytID test kits are billed as this)
Brush Biopsy	D7288	88112	\$440	Cytopathology, selective cellular enhancement technique with interpretation (e.g. liquid based slide preparation method)

*Average Fees can vary and take into consideration all procedures that are listed under that category. Procedures can range in difficulty/size of neoplasm. Take into consideration outside lab fees, are you paying these or are the patient being billed separately? <http://fairhealthconsumer.org/index.php> to look at average fees in a specific area. They are vague averages and should be researched fully before charging out.

**CytID encourages offices to contact them to discuss fees, as their recommendations are lower than this average. Take into consideration CytID also bills the patient for their services.

ICD-9 and ICD-10 Codes

ICD-9 or ICD-10 Codes: International Classification of Disease Codes. ICD Codes, aka diagnosis codes, are required with all medical (AMA) claims.

Effective for procedures after date of service October 1, 2015, ICD-10 codes are to be used. There are, however, some insurances that are still asking for ICD-9 codes. If you're not sure what code they will take, send ICD-10 if the date of service is after October 1. If the date of service is before October 1, 2015, send with ICD-9.

ICD-9/10 Code for screening for malignant neoplasms in oral cavity:

ICD-9: V76.42

ICD-10: Z12.81

If they're familiar with a certain set of ICD-9 codes, there's a great website that will translate codes:

<http://www.aapc.com/icd-10/codes>

Submitting oral cancer screening/procedures to insurances:

Most insurances, medical and dental alike, do not cover oral cancer tests (like OralID). Oral cancer screens can be sent directly to dental insurance. Contact the patient's plan to confirm coverage.

Biopsies/cytologies: dental typically requests this go to medical before they will consider coverage. Send to medical (make sure to set up medical/dental cross coding in your claim formatter) then send to dental with an attached medical EOB (explanation of benefits). Most dental plans will also require a lab report/narrative be sent with the claim before consideration as well.

No double dipping. Don't submit to medical and dental without informing the other.