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Dear Patty,

Q: What is skin cancer?

A: Skin cancer is the most common form of cancer in the United States. The two most common types of skin cancer—basal cell and squamous cell carcinomas—are highly curable, but can be disfiguring and costly to treat. Melanoma, the third most common skin cancer, is more dangerous and causes the most deaths. The majority of these three types of skin cancer are caused by overexposure to ultraviolet (UV) light.

Q: What are the risk factors for Skin Cancer?

A: People with certain risk factors are more likely than others to develop skin cancer. Risk factors vary for different types of skin cancer, but some general risk factors are having:

- A lighter natural skin color.
- Family history of skin cancer.
- A personal history of skin cancer.
- Exposure to the sun through work and play.
- A history of sunburns, especially early in life.
- A history of indoor tanning.
- Skin that burns, freckles, reddens easily, or becomes painful in the sun.
- Blue or green eyes.
- Blond or red hair.
- Certain types and a large number of moles.



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**Q:** When is UV exposure outdoors the most dangerous?

**A:** The hours between 10 a.m. and 4 p.m. Daylight Saving Time (9 a.m. to 3 p.m. standard time).

**Q:** What can I do to protect myself from UV radiation?

**A:** The CDC recommends:

- Staying in the shade, especially during midday hours.
- Wearing clothing that covers your arms and legs
- Wearing a hat with a wide brim to shade your face, head, ears, and neck.
- Wearing sunglasses that wrap around and block both UVA and UVB rays.
- Using sunscreen with a sun protection factor (SPF) of 15 or higher, and both UVA and UVB (broad spectrum) protection.
- Avoiding indoor tanning (using a tanning bed, booth, or sunlamp to get a tan)

**Q:** At a recent visit with my Primary Care Physician, he noticed a mole on my face that appeared suspicious. He suggested I consult with a Dermatologist. I'm enrolled on the Basic HMO plan. Do I need a referral?

**A:** You do not need a referral from your Primary Care Physician to consult with an In-network Dermatologist for the first 5 visits.

- Centers for Disease and Prevention (2018). Skin Cancer. Retrieved from <https://www.cdc.gov/cancer/skin/index.htm>



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Q: What is my copay?

A: Your copay for a specialist is \$65 per visit.

Q: The Dermatologist performed a biopsy of the mole. Is there an additional cost for this service?

A: No. Surgical services performed in an office setting are subject to the specialist office visit copay per visit.

Q: The Dermatologist sent the specimen from my biopsy to an out of network Pathologist/Lab. I received a bill. What should I do?

A: Quest Diagnostics and Ameripath are Florida Blue's preferred laboratory and anatomical pathology provider. The preferred lab for dermatopathology services is DermPath Diagnostics.

I suggest all members advise their doctors of the preferred laboratory as indicated above. Any services performed by a non-participating lab/pathologist will deny if prior authorization was not requested. I recommend that you contact the dermatologist's office and inquire why the specimen was not sent to a participating lab. It could possibly be an oversight. If you need assistance, please contact me at one of the above phone numbers.

- Centers for Disease and Prevention (2018). Skin Cancer. Retrieved from <https://www.cdc.gov/cancer/skin/index.htm>