

DENTAL  
SLEEP  
MEDICINE

# Insider

MAGAZINE

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Issue 13

## Kentucky Engineering and the TAP 3 Elite

*by Dr. Gy Yatros*

## The Herbst Mechanism is Changing

*by David Walton*

## The 7 Sins of 3rd Party Billing

*by Lesia Crawford*



### HST: THAT HUMBLE GIANT

Efficacy Home Sleep Tests are necessary to demonstrate OAT effectiveness. What does that mean for your bottom line?

### THE COST OF NOT HAVING CBCT

CBCT can be viewed as cost-prohibitive. Dr. Tarun Agarwal explains why you've got it all wrong.

### LIFE AFTER GENERAL DENTISTRY...

What does life look like after health issues preclude general dentistry from your life? Read Roy Novack's story here!

# WHO'S WHO



## TARUN "T-BONE" AGARWAL, D.D.S.

**Brandie:** What led you to begin using CBCT for sleep and airway evaluation?

**Dr. Agarwal:** About 3 - 4 years ago I started learning more about DSM myself. One of the challenges I was facing was how to get begin the discussion with my patients. 90% of the patients with OSA don't even know they have it. We have to create awareness. Using the larger Field of View (FOV) CBCT we're able to capture the airway in the cone beam image itself.

Before, we were simply using a black and white image to show them the airway as it was captured. There was no segmentation or ability to do anything, but it was a way for me to show the patient what their airway looked like. Now, with airway segmentation software, we are able to seg-

ment out the airway and have a color rendition. This allows us to show the patient exactly how large their airway is. Using it as a conversation starter is what ultimately led me to begin using it for sleep.

**Brandie:** How does CBCT fit into your sleep patient workflow?

**Dr. Agarwal:** Personally, CBCT imaging has 3 main purposes for sleep apnea and in our practice, it's a team-driven workflow.

**1. Create awareness.** We take a 3D image on all our new patients as appropriate based on age, cancer conditions, etc. It has completely replaced the panorex in our practice. In the hygiene room or in the consultation session, team members will utilize it to show the airway through segmentation.

**2. Digital fabrication of an appliance.** When the patient is diagnosed with OSA through a sleep test, we're able to use the airway software combined with digital impressions to fabricate our sleep appliances. Instead of taking a traditional George Gauge bite, we take a scan with the patient in the bite position. We then take digital impressions of the arches. The software combines those and virtually mounts that into the airway position. We are able to see the jaw joints in the treatment position, allowing us to determine if the bite position is potentially causing stress on the joints or putting them in an unfavorable position.

**3. Post-op objective evaluation of any airway changes.** Since we have a pre-treatment airway analysis, we're now able to have a post-treat-

ment airway analysis with the appliance titrated in place and we can physically see any changes in the airway.

I would like to make sure the readers are absolutely clear that a CBCT is not diagnostic for OSA. The only method to diagnose this is through a PSG or HST.

referred or a patient that has responded to one of our signs in the practice about sleep, to now, where we are creating awareness among patients that didn't even know they had the condition. We have nearly doubled our appliances by integrating CBCT to increase awareness of sleep apnea.

have medical insurance pay for it. We are seeing about 20% of our 3D scans being paid by medical insurance, and our average reimbursement is from \$250-\$400 for each 3D scan we take. That alone could easily pay for the technology. If you look at the ability to do more implants than you were, then that's quite easy. The first step to monetizing it is to own it. The second step is to utilize it and you have to have a plan of action to be able to make it happen.



#### INTERVIEWED BY

*Brandie Havell*  
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**Brandie:** Financially, what impact have CBCT and sleep had on your practice?

**Dr. Agarwal:** It has really helped jumpstart our sleep practice because the number one challenge for dentists to integrate sleep into the practice is creating awareness.

There's no question that the need is there, that the patients are there, and that it's a condition in our patient population. We now have a workflow, protocols in place, and technology that allows us to easily show the patient what we're seeing.

We know exactly what we need to do based on if they have an existing sleep study or if they need one. So financially, this has led us to go from doing sleep appliances every once in a while, on patients directly

**Brandie:** What would you say to a colleague concerned about the cost of a unit and the ability to monetize it?

**Dr. Agarwal:** I personally believe these technologies are, in a way, free because there are so many ways to pay for them. The typical CBCT is anywhere from \$80,000-\$130,000 so one has to look at how it will:

- *Enhance the visibility and awareness of your practice*
- *Enable you to add procedures and services to your practice*
- *Be directly reimbursed*

Until 2 years ago, I didn't understand that you can utilize medical billing to help pay for the CBCT scans when medically necessary. In other words, you can oftentimes

**Brandie:** Lastly, I have to ask; how did you get the name T-Bone?

**Dr. Agarwal:** When I first met my wife in 2000, my real name is Tarun and apparently for Americans, that's a harder name to say. So, when she was introducing me, she would just call me T-Bone and the name stuck. In college I was just T, but now after being called T-Bone, I just went with it.

Dr. Tarun Agarwal represents the next generation of leadership for the dental profession. As a respected speaker, author and opinion leader, he is changing the way general dentists practice. His common sense approach to business, dedication to clinical excellence, integration of technology and down to earth demeanor has made him a recognized educator. Contact him or visit his website listed below.

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[www.3d-dentists.com](http://www.3d-dentists.com)



# Sleep Apnea Implementation

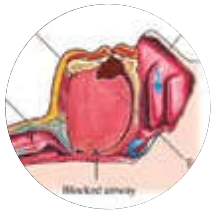
Predictable Workflow for the General Practice

**Do you realize that nearly 1 of 15 patients  
in your practice has sleep apnea?**

If you aren't providing oral appliance therapy for obstructive sleep apnea then you are missing out on helping to save patient lives and adding a massive profit center to your practice. This workshop focuses on the missing piece—a practical and predictable workflow to successful implementation.

This workshop is based on real life challenges and implemented techniques that have led to successful results with OSA therapy. Go beyond just the science and learn an implementation system that actually works. Detailed attention is given to the four steps to successful implementation — awareness, diagnosis, financials and treatment.

**LEAVE THIS WORKSHOP WITH THE EDUCATION, EXPERIENCE  
AND CONFIDENCE ON TOPICS INCLUDING:**



### OSA Fundamentals

Understand the fundamentals of dental sleep medicine. Stages of sleep, recognizing candidates, the sleep exam, and more.



### Appliance Therapy

Understand how to choose the right oral appliance, follow up protocol, when to titrate, and what to watch out for.



### Home Screening

Learn to implement an in-office screening protocol to fast track your patients and learn to decipher sleep test results.



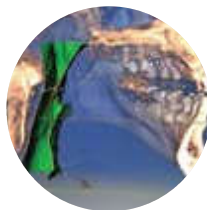
### MD Referrals

Learn how to nurture sleep referrals, how to properly communicate treatment through letters, and how to speak sleep medicine.



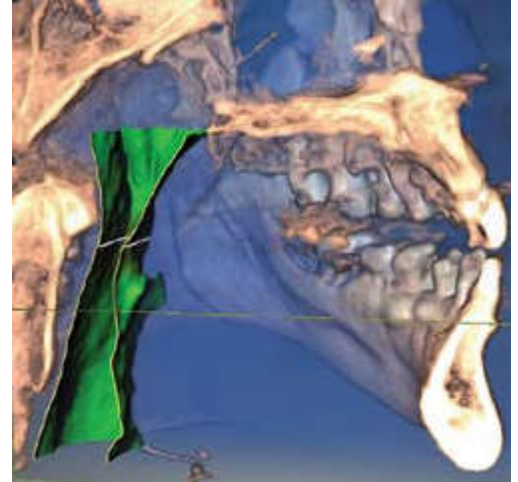
### Medical Insurance

Learn a proven workflow for sleep medicine benefit checks, pre-authorizations, claim submission, and letters of medical necessity.



### 3D Integration

Learn to use your CBCT and CEREC to digitize oral sleep treatment and measure treatment outcomes.



Dr. Tarun Agarwal



Dr. Erin Elliott

### CE Credits

14

### 2016 Course Dates

AUGUST 19-20  
NOVEMBER 4-5

### Registration

DENTIST	TEAM MEMBER
\$1,795	\$595*

\*Dentist must attend with team.

Learn more and register at [3D-Dentists.com](http://3D-Dentists.com)

(855) 332-2285 • [info@3d-dentists.com](mailto:info@3d-dentists.com)



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