

## Before Your Initial Appointment

### Insurance

We recommend that you call your insurance company to determine if you have benefits for oral appliance therapy for treatment of obstructive sleep apnea. Your insurance company may ask for a CPT or HCPCS code to look up the treatment. The billing code for the appliance is E0486. Also ask your insurance company if a prior authorization is required before you can receive the oral appliance.

As we are currently not participating with any insurance plans, we will be considered “out-of-network”. Therefore, you will also want to ask your insurance carrier if you have out-of-network benefits and if so, what are those benefits? We do require payment in full at the time of service. We then submit a claim to your insurance company on your behalf. Your insurance company will then reimburse you directly for any benefits for which you are entitled.

### Referrals

If your insurance company requires a referral from your primary clinic in order to receive insurance benefits, please contact your primary physician to ensure the proper steps are being taken to put a referral into place before your appointment.

## Patient Check List

Please bring the following items to your appointment:

- Completed questionnaires (enclosed). (6 forms for patient & 1 for bed partner/witness)
- Any doctor’s notes or test results, sleep studies or other information related to your sleep problem
- Physicians written orders
- Your oral appliance (i.e. splint/night guard), if you have one
- Any panoramic x-rays from your dentist taken within the last 2 years
- Name and address of your physician, dentist and any other treating physician
- List of current medications and the dosages
- Current insurance card