

Sleep Study Prior Authorization Requirement

CountyCare Health Plan is committed to providing efficient, consistent and high-quality utilization management (UM) experiences for both members and providers. This communication serves as advance notice of upcoming prior authorization (PA) requirements for sleep study services.

Effective Sept. 1, 2026, the following procedure codes will require prior authorization:

Code Type	Code	Description
CPT	95782	Polysomnography; younger than age 6, sleep staging with four or more additional parameters of sleep, attended by a technologist
CPT	95783	Polysomnography; younger than age 6, sleep staging with four or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist
CPT	95800	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (e.g., by airflow or peripheral arterial tone) and sleep time
CPT	95801	Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation and respiratory analysis (e.g., by airflow or peripheral arterial tone)
CPT	95806	Sleep study, unattended, simultaneous recording of heart rate, oxygen saturation, respiratory airflow and respiratory effort (e.g., thoracoabdominal movement)

Requests will be reviewed for medical necessity using nationally recognized criteria (InterQual). The CountyCare prior authorization form (found on countycare.com/providers under prior authorization) should be completed and include supporting clinical documentation, such as:

- Diagnosis and clinical indication for sleep study (e.g., suspected obstructive sleep apnea or other sleep disorder)
- Relevant symptoms and clinical history (e.g., snoring, witnessed apneas, excessive daytime sleepiness)
- Prior evaluation and treatment history, when applicable
- Documentation supporting medical necessity for in-lab vs. home sleep study, if applicable

This notice is intended to provide guidance for in-network providers. All out-of-network requests are subject to prior authorization. Out-of-network requests may be redirected to an in-network provider whenever possible and will be subject to physician review.



Provider Notice

June 2026

How to Request Prior Authorization

- **Provider portal (Preferred method – in-network providers only):** Submit requests via the CountyCare [provider portal](#) for a quicker response.
- Phone: Call 312-864-8200, option 3 or 855-444-1661, option 3.
- Fax: Please review the provider manual available at www.countycare.com for fax numbers and details.

Information on authorization codes can be found on CountyCare's Prior Authorization Look-Up Tool at www.countycare.com/providers.

Contact Us

Thank you for working with us to ensure that CountyCare members receive quality care. If you have any questions or would like additional information, please contact CountyCare Provider Services at countycareproviderservices@cookcountyhhs.org or your assigned provider relations representative. You can also reach CountyCare Provider Services by phone at 312-864-8200, option 3.