

**To:** Nebraska Medicaid Managed Care Plans  
**From:** Matthew Ahern, Interim Director *MLA*  
**Date:** February 29, 2024  
**Re:** Prior Authorization will be Required for Attended Sleep Studies

This health plan advisory is being issued to notify Heritage Health Plans that prior authorization for attended sleep studies will be required **effective April 1, 2024**. This applies to children and adults who are fee-for-service Medicaid members.

Attended sleep studies are covered based on the individual's needs when the study is medically indicated and appropriate. Prior authorization will be required for the following CPT codes:

Service	Code
Polysomnography, attended by a technologist: <ul style="list-style-type: none"> <li>younger than 6 years, sleep staging with 4 or more additional parameters of sleep.</li> </ul>	95782
Polysomnography, attended by a technologist: <ul style="list-style-type: none"> <li>younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation.</li> </ul>	95783
Multiple sleep latency or maintenance of wakefulness testing: <ul style="list-style-type: none"> <li>recording, analysis, and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness</li> </ul>	95805
Sleep study, attended by a technologist: <ul style="list-style-type: none"> <li>simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation</li> </ul>	95807
Polysomnography, attended by a technologist: <ul style="list-style-type: none"> <li>any age, sleep staging with 1-3 additional parameters of sleep.</li> </ul>	95808
Polysomnography, attended by a technologist: <ul style="list-style-type: none"> <li>age 6 years or older, sleep staging with 4 or more additional parameters of sleep</li> </ul>	95810
Polysomnography, attended by a technologist: <ul style="list-style-type: none"> <li>age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of CPAP or BiPAP</li> </ul>	95811

Prior authorization forms should be sent to Acentra through the [provider portal](#) or via fax to 800-316-0021.

If you are faxing the authorization, the prior authorization fax form can be found [here](#) or online at: <https://dhhs.ne.gov/Pages/Utilization-Management.aspx>.

If you have questions regarding this advisory, please contact Nebraska Medicaid via email at: [DHHS.MLTCPhysicalHealth@Nebraska.gov](mailto:DHHS.MLTCPhysicalHealth@Nebraska.gov). Health plans should also copy their contract manager.

Health Plan Advisories, such as this one, are posted on the DHHS website at <https://dhhs.ne.gov/Pages/Heritage-Health-Plan-Advisories.aspx>. Please subscribe to the page to help you stay up to date about new Health Plan Advisories.