



Prominence Health Plan Sleep Management CPT Code List

Platform: Image One

| Product | Category | CPT® Code | CPT® Code Description | Commercial | Medicare |
|---------|----------|-----------|---|------------|----------|
| Sleep | DME | 94660 | Continuous Positive Airway Pressure Ventilation (CPAP), Initiation And Management | Yes | No |
| Sleep | Sleep | 95782 | Polysomnography; Younger Than 6 Years, Sleep Staging With 4 Or More Additional Parameters Of Sleep, Attended By A Technologist | Yes | No |
| Sleep | Sleep | 95783 | Polysomnography; 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, Attended By A Technologist | Yes | No |
| Sleep | Sleep | 95800 | Sleep Study, Unattended, Simultaneous Recording; Heart Rate, Oxygen Saturation, Respiratory Analysis (E.G., By Airflow Or Peripheral Arterial Tone), And Sleep Time | Yes | No |
| Sleep | Sleep | 95801 | Sleep Study, Unattended, Simultaneous Recording; Minimum Of Heart Rate, Oxygen Saturation, Respiratory Analysis (E.G., By Airflow Or Peripheral Arterial Tone), And Sleep Time | Yes | No |
| Sleep | Sleep | 95805 | Multiple Sleep Latency Test Or Maintenance Of Wakefulness Test | Yes | No |
| Sleep | Sleep | 95806 | Sleep Study, Unattended, Simultaneous Recording Of, Heart Rate, Oxygen Saturation, Respiratory Airflow, And Respiratory Effort (E.G. Thoracoabdominal Movement) | Yes | No |
| Sleep | Sleep | 95807 | Sleep Study, Simultaneous Recording Of Ventilation, Respiratory Effort, ECG Or Heart Rate, And Oxygen Saturation, Attended By A Technologist | Yes | No |
| Sleep | Sleep | 95808 | Polysomnography, Sleep Staging With 1-3 Additional Parameters Of Sleep, Attended By A Technologist | Yes | No |
| Sleep | Sleep | 95810 | Polysomnography, Sleep Staging With 4 Or More Additional Parameters Of Sleep, Attended By A Technologist | Yes | No |
| Sleep | Sleep | 95811 | Polysomnography, Sleep Staging With 4 Or More Additional Parameters Of Sleep For PAP Titration, With Initiation Of Continuous Positive Airway Pressure Therapy Or Bilevel Ventilation, Attended By A Technologist | Yes | No |
| Sleep | DME | A4604 | Tubing With Integrated Heating Element For Use With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7027 | Combination Oral/Nasal Mask, Used With Continuous Positive Airway Pressure Device, Each | Yes | No |
| Sleep | DME | A7028 | Oral Cushion For Combination Oral/Nasal Mask, Replacement Only, Each | Yes | No |
| Sleep | DME | A7029 | Nasal Pillows For Combination Oral/Nasal Mask, Replacement Only, Pair | Yes | No |
| Sleep | DME | A7030 | Full Face Mask Used With Positive Airway Pressure Device, Each | Yes | No |
| Sleep | DME | A7031 | Face Mask Interface, Replacement For Full Face Mask, Each | Yes | No |
| Sleep | DME | A7032 | Cushion For Use On Nasal Mask Interface, Replacement Only, Each | Yes | No |
| Sleep | DME | A7033 | Pillow For Use On Nasal Cannula Type Interface, Replacement Only, Pair | Yes | No |
| Sleep | DME | A7034 | Nasal Interface (Mask Or Cannula Type) Used With Positive Airway Pressure | Yes | No |
| Sleep | DME | A7035 | Headgear Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7036 | Chinstrap Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7037 | Tubing Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7038 | Filter, Disposable, Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7039 | Filter, Non Disposable, Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | A7044 | Oral Interface Used With Positive Airway Pressure Device, Each | Yes | No |
| Sleep | DME | A7045 | Exhalation Port With Or Without Swivel Used With Accessories For Positive | Yes | No |
| Sleep | DME | A7046 | Water Chamber For Humidifier, Used With Positive Airway Pressure Device, | Yes | No |
| | Sleep | A9270 | Non-covered item or service (Used for oral appliances that do not incorporate all of the criteria as set forth in the Policy Article; tongue-retaining or tongue-positioning devices; and devices that are used only to treat snoring without a diagnosis of obstructive sleep apnea) | Yes | No |

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|---------|----------|--------------|---|------------|----------|
| Sleep | DME | E0470 | Respiratory Assist Device, Bi-Level Pressure Capability, Without Backup Rate | Yes | No |
| Sleep | DME | E0471 | Respiratory Assist Device, Bi-Level Pressure Capability, With Back-Up Rate | Yes | No |
| | Sleep | E0485 | Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, prefabricated, includes fitting and adjustment | Yes | No |
| | Sleep | E0486 | Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, custom fabricated, includes fitting and adjustment | Yes | No |
| Sleep | DME | E0561 | Humidifier, Non-Heated, Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | E0562 | Humidifier, Heated, Used With Positive Airway Pressure Device | Yes | No |
| Sleep | DME | E0601 | Continuous Airway Pressure (CPAP) Device | Yes | No |
| Sleep | Sleep | G0398 | Home Sleep Study Test (HST) With Type II Portable Monitor, Unattended; Minimum Of 7 Channels Including: EEG, EOG, EMG, Respiratory Movement, Airflow, ECG/Heart Rate And Oxygen Saturation | Yes | No |
| Sleep | Sleep | G0399 | Home Sleep Study Test (HST) With Type III Portable Monitor, Unattended; Minimum Of 4 Channels: 2 Respiratory Movement/Airflow, 1 Ecg/Heart Rate And 1 Oxygen Saturation | Yes | No |
| Sleep | Sleep | G0400 | Home Sleep Study Test (HST) With Type IV Portable Monitor, Unattended; Minimum Of 3 Channels | Yes | No |
| | Sleep | K1027 | Oral device/appliance used to reduce upper airway collapsibility, without fixed mechanical hinge, custom fabricated, includes fitting and adjustment | Yes | No |
| | SLEEP | K1028 | Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle for the reduction of snoring and obstructive sleep apnea, controlled by phone application | Yes | No |
| | SLEEP | K1029 | Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90-day supply | Yes | No |

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