

Learn more about prior authorization process changes for in-lab sleep studies for commercial members

Starting Nov. 3, 2025, health care providers will need to do the following for in-lab sleep studies for most Blue Cross Blue Shield of Michigan and Blue Care Network commercial members:

- Submit prior authorization requests for most adult commercial members through the e-referral system.
- Submit plan notification for pediatric BCN commercial members through the e-referral system when the in-lab sleep study will be performed in the East or Southeast region. Plan notification alerts BCN about scheduled services and facilitates claims payment. Clinical review isn't required.

This article provides detailed information about this change. We'll also publish this information in upcoming issues of *The Record* and *BCN Provider News*.

Notes:

- In the [July Record](#) and the [July-August BCN Provider News](#), we communicated that this change would happen Oct. 1.
- You don't need to submit anything in the e-referral system for in-lab sleep studies for pediatric Blue Cross commercial members.

What procedure codes will and won't require prior authorization?

For dates of service on or after Nov. 3, 2025:

- The following procedure codes will continue to require prior authorization or require plan notification: *64582, *95805, *95807, *95808, *95810 and *95811.
- The following procedure codes will no longer require prior authorization: *64583 and *64584.

Providers will be able to submit requests for in-lab sleep studies through the e-referral system starting Nov. 3.

Note: If you need to submit a retroactive authorization request after Nov. 3 for a sleep study that occurred before Nov. 3, submit the retroactive request to Caredon Medical Benefits Management. Caredon will accept retroactive requests through Jan. 31, 2026.

What groups and members will be affected by this change?

The management of in-lab sleep studies will move from Caredon to Blue Cross or BCN for:

- Blue Cross commercial
 - All fully insured members, including MESSA members

- Most self-funded groups — see the exceptions below
- All members with individual coverage
- All BCN commercial members

Exceptions

- Carelon will continue to manage prior authorizations for in-lab sleep studies for adult members who have commercial coverage through Chrysler, Delphi/Aptiv, General Motors or UAW Retiree Medical Benefits Trust. However, you'll no longer need to submit prior authorization requests for pediatric members.
- Members who have coverage through the Blue Cross and Blue Shield Federal Employee Program®, the State of Michigan and select Ascension Health groups don't require prior authorization for in-lab sleep studies for dates of service before, on or after Nov. 3.

To determine whether a procedure code requires prior authorization for a specific member and where to submit the prior authorization request, log in to our provider portal (availity.com**), click *Patient Registration*, click *Authorizations & Referrals*, click *Authorization Request* and enter the requested information. Availity Essentials™ will tell you whether you need to submit a prior authorization request for the member. For detailed instructions, see the document titled [Determining prior authorization requirements for members](#).

How will the process for requesting prior authorization change?

For the members whose prior authorization requests are managed by Blue Cross or BCN, here's how the process will work:

1. The health care provider creates a prior authorization request in the e-referral system.
2. The provider attaches all clinical documentation to the request.
3. The provider clicks the *AuthAI* link.
4. Through artificial intelligence and automation powered by Availity® AuthAI, the sleep studies questionnaire is automatically populated.
5. The provider reviews the answers in the questionnaire and submits the questionnaire.
6. The provider submits the prior authorization request.
7. One of the following will happen:
 - If all criteria are met, the request will be approved.
 - If Blue Cross or BCN needs additional information to process the request or the case has been pended for medical review, that will be noted in the Case Communication field in the e-referral system.

Although we'll use artificial intelligence to approve requests, we'll never use AI to deny requests. Any requests that can't be approved through the process outlined above will be manually reviewed by an appropriate clinician. You can check the status of your requests through the e-referral system; see the [e-referral User Guide](#) for details.

The goals of this new streamlined process are to reduce manual effort by providers, decrease turnaround time and increase the speed and accuracy of determinations.

The streamlined process will continue to adhere to regulatory and legislative guidelines.

What is the process for submitting plan notification?

To learn how to submit plan notification for pediatric BCN commercial members, see the [e-referral User Guide](#). In *Section IV: Referrals and Authorizations*, look for subsection 3. *Submit a referral*.

Training opportunities

We'll offer a recorded overview, a recorded demo and live Q & A sessions. For details, see the provider alert titled [Training opportunities for in-lab sleep studies managed by Blue Cross and BCN](#).

Additional information

We'll update our provider manuals and related communications to reflect this change by Nov. 3. We'll also publish a document specific to the new prior authorization process for in-lab sleep studies.

For information about appealing requests that aren't approved, see the denial letter.

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