

## PHARMACY POLICY STATEMENT

### Marketplace

|                  |                                                                    |
|------------------|--------------------------------------------------------------------|
| <b>DRUG NAME</b> | <b>Short Term Continuous Glucose Monitoring (Professional CGM)</b> |
| BILLING CODE     | 95250, 95251                                                       |
| BENEFIT TYPE     | Medical                                                            |
| STATUS           | Prior Authorization Required                                       |

Professional Continuous Glucose Monitors (CGM) are devices placed on the patient in the provider's office and worn for a discrete period of time (typically 7-14 days). The collected blood glucose data is used to assess glycemic patterns and trends. Professional CGMs may be useful when a real time, or intermittently scanned, CGM is not available a patient, the patient prefers a blinded analysis, or the patient prefers a shorter experience with CGMs. Use of CGMs should always be coupled with interpretation and analysis, along with education on

Short Term Continuous Glucose Monitoring will be considered for coverage when the following criteria are met:

#### Type 1 or Type 2 Diabetes

For **initial** authorization:

1. Member has a diagnosis of type 1 diabetes or insulin dependent type 2 diabetes; AND
2. Continuous glucose monitoring to be used for short term use (up to 14 days); AND
3. Member has one of the following:
  - a) Patient has hypoglycemia unawareness;
  - b) Patient has recurrent hypoglycemia (< 50 mg/dl) and hyperglycemia (> 150 mg/dl); or
  - c) Patient experiences uncontrolled glucose levels although they are compliant with current treatment, including self-monitoring at least 4 times per day.

***If all the above requirements are met, the medication will be approved for up to 14 days.***

For **reauthorization**:

***Short term continuous glucose monitors will not be reauthorized.***

**CareSource considers Short Term Continuous Glucose Monitoring not medically necessary for the treatment of conditions that are not listed in this document. For any other indication, please refer to the Off-Label policy.**

| DATE       | ACTION/DESCRIPTION                                             |
|------------|----------------------------------------------------------------|
| 11/14/2022 | New policy for Short Term Continuous Glucose Monitors created. |

#### References:

1. American Diabetes Association Professional Practice Committee. Glycemic Targets: Standards of medical Care in Diabetes-2022. Diabetes Care 2022;45(Supplement\_1):S83-S96. doi:10.2337/dc22-S006.

2. American Diabetes Association Professional Practice Committee. Pharmacologic Approaches to Glycemic Treatment: Standards of Medicare Care in Diabetes-2022. *Diabetes Care* 2022;45(Supplement\_1):S125-143. doi:10.2337/dc22-S009.
3. Centers for Disease Control and Prevention. (2022 January 18). National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States. Retrieved April 18, 2022 from [www.cdc.gov](http://www.cdc.gov).
4. Edelman SV, Argento NB, Pettus J, Hirsch IB. Clinical implications of real-time and intermittently scanned continuous glucose monitoring. *Diabetes Care*. 2018 Nov;41:2265-2274. doi:10.2337/dc18-1150.
5. Evolving Evidence Review. (2022 April 5). Dexcom G6 (Dexcom, Inc.) Continuous Glucose Monitoring System for Type 2 Diabetes Mellitus. Hayes. Retrieved April 18, 2022 from [www.evidence.hayesinc.com](http://www.evidence.hayesinc.com).
6. Handelsman Y, Bloomgarden ZT, Grunberger G, et al. American Association of Clinical Endocrinologists and American College of Endocrinology - Clinical Practice Guidelines for Developing A Diabetes Mellitus Comprehensive Care Plan - 2015. *AACE/ACE Guidelines*. 2015 April;21(4):413-437. doi:10.4158/EP15672.GL.
7. Health Technology Assessment. (2022 March 14). Eversense Continuous Glucose Monitoring System for Maintaining Glycemic Control in Adults with Diabetes Mellitus. Hayes. Retrieved April 18, 2022 from [www.evidence.hayesinc.com](http://www.evidence.hayesinc.com).
8. Levitsky L. (2021 November 5). Overview of the management of type 1 diabetes mellitus in children and adolescents. UpToDate. Retrieved April 18, 2022 from [www.uptodate.com](http://www.uptodate.com).
9. Levitsky L, Misra M. (2022 February 2). Hypoglycemia in children and adolescents with type 1 diabetes mellitus. UpToDate. Retrieved April 18, 2022 from [www.uptodate.com](http://www.uptodate.com).
10. Tamborlane WV, Beck RW, Bode BW, et al. Continuous glucose monitoring and intensive treatment of type 1 diabetes: Juvenile Diabetes Research Foundation Continuous Glucose Monitoring Study Group. *N Engl J Med*. 2008;359:1464-1476. doi:10.1056/NEJMoa0805017.
11. Weinstock RS. (2021 February 15). Management of blood glucose in adults with type 1 diabetes mellitus. UpToDate. Retrieved April 18, 2022 from [www.uptodate.com](http://www.uptodate.com).
12. Wexler DJ. (2021 December 20). Overview of general medical care in nonpregnant adults with diabetes mellitus. UpToDate. Retrieved April 18, 2022 from [www.uptodate.com](http://www.uptodate.com).

Effective date: 01/01/2023

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