# Continuous Glucose Monitoring Devices (CGMs)

| Override(s) | Approval Duration |
|---|---|
| Prior Authorization<br>Quantity Limit | Receiver: One time<br>Sensors and transmitters: 1 year |

| Continuous Glucose Monitoring Devices (CGMs) – including sensor, transmitter, receiver | Comments |
|---|---|
| Freestyle Libre Product Line – CT and CO only | Preferred |
| Dexcom Product Line<br><br>Freestyle Libre Product Line – all states except CT and CO<br><br>Eversense Product Line<br><br>Medtronic Product Lines for the following products:<br>• Enlite sensors<br>• Guardian (monitors, receivers, sensors, transmitters)<br>• Minimed Guardian sensor<br>• Sof-sensor | Non-Preferred |

| Product/Product Line | Quantity Limit |
|---|---|
| Dexcom G5 Receiver* | 1 receiver per year<br>(based on manufacturer warranty) |
| Dexcom G5 Transmitter | 1 transmitter per 90 days |
| Dexcom G5 Sensor | 4 sensors per 28 days |
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| Dexcom G6 Receiver* | 1 receiver per year<br>(based on manufacturer warranty) |
| Dexcom G6 Transmitter | 1 transmitter per 90 days |
| Dexcom G6 Sensor | 3 sensors per 30 days |
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| Dexcom G7 Receiver* | 1 receiver per year<br>(based on manufacturer warranty) |
| Dexcom G7 Sensor | 3 sensors per 30 days |
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|---|---|
| Freestyle Libre reader* | 1 reader per year<br>(based on manufacturer warranty) |
| Freestyle Libre 10 day sensor | 3 sensors per 30 days |
| | |
| Freestyle Libre 14 day Reader* | 1 reader per year<br>(based on manufacturer warranty) |
| Freestyle Libre 14 day Sensor | 2 sensors per 28 days |
| | |
| Freestyle Libre 2 Reader* | 1 reader per year |
| Freestyle Libre 2 Sensor | 2 sensors per 28 days |
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| Freestyle Libre 3 Sensor | 2 sensors per 28 days |
| | |
| Guardian Connect Transmitter* | 2 transmitters per year |
| Guardian Sensor (3) | 5 sensors per 30 days |
| | |
| Eversense Smart Transmitter* | 1 transmitter per year |

## APPROVAL CRITERIA

### Step Therapy for non-preferred agents

**CT and CO only** - Requests for non-preferred continuous glucose monitoring devices and supplies (receiver, transmitter, sensor) must meet the following criteria:

I. Individual has had a trial (medication samples/coupons/discount cards are excluded from consideration as a trial) and inadequate response or intolerance of one preferred continuous glucose monitor (Freestyle Libre Product Line); **OR**
II. Individual utilized an insulin pump that is only compatible with a non-preferred continuous glucose monitor.

### Prior Authorization for all agents

Initial requests for p*ersonal long-term use* of continuous interstitial glucose monitoring devices as an adjunct to standard care may be approved for *any* of the following:

A. Individuals greater than or equal to 14 years old with diabetes mellitus (any type) who meet the following criteria:
    1. Inadequate glycemic control, demonstrated by HbA1c measurements between 7.0% and 10.0%, despite multiple alterations in self-monitoring and insulin administration regimens to optimize care; **AND**
    2. Insulin injections are required multiple times daily or a medically necessary insulin pump is used for maintenance of blood sugar control; **OR**
B. Individuals, regardless of age, with diabetes mellitus (any type) who meet the following criteria:

1. Recurring episodes of hypoglycemia; **AND**
2. Inadequate glycemic control despite multiple alterations in self-monitoring and insulin administration regimens to optimize care; **AND**
3. Insulin injections are required multiple times daily or a medically necessary insulin pump is used for maintenance of blood sugar control; **or**

C. Individuals with type 1 diabetes who are pregnant, during the course of the pregnancy, who meet the following criteria:
   1. Inadequate glycemic control, including fasting hyperglycemia or with recurring episodes of hypoglycemia in spite of compliance with multiple alterations in self-monitoring and insulin administration regimens to optimize care; **AND**
   2. Insulin injections are required multiple times daily or a medically necessary insulin pump is used for maintenance of blood sugar control; **AND**
   3. Multiple blood glucose tests are required daily.

Continuation requests for CGM supplies may be approved if the following criteria are met:

I. Individual met the initiation criteria at the time of the first request for the CGM device; **AND**
II. Individual has seen improvement in diabetes management as a result of using the CGM; **AND**
III. Individual has a CGM device that is compatible with requested supplies.

***Quantity Override:**

The *replacement* of continuous interstitial glucose monitoring devices may be approved when the following criteria have been met:

A. The device is out of warranty; **AND**
B. The device is malfunctioning; **AND**
C. The device cannot be refurbished.

Use of continuous interstitial glucose monitoring devices may not be approved for all other indications, including but not limited to:

I. When the criteria above have not been met.

**Key References**:


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2. DrugPoints® System [electronic version]. Truven Health Analytics, Greenwood Village, CO. Updated periodically.
3. Lexi-Comp ONLINE™ with AHFS™, Hudson, Ohio: Lexi-Comp, Inc.; 2022; Updated periodically.
4. Tamborlane WV, Beck RW, Bode BW, et al.; Juvenile Diabetes Research Foundation Continuous Glucose Monitoring Study Group. Continuous glucose monitoring and intensive treatment of type 1 diabetes. N Engl J Med. 2008; 359(14):1464-1476.
5. Juvenile Diabetes Research Foundation Continuous Glucose Monitoring Study Group. Effectiveness of continuous glucose monitoring in a clinical care environment. Diabetes Care. 2010; 33(1):17-22.

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7. Heinemann L, Freckmann G, Ehrmann D, et al. Real-time continuous glucose monitoring in adults with type 1 diabetes and impaired hypoglycaemia awareness or severe hypoglycaemia treated with multiple daily insulin injections (HypoDE): a multicentre, randomised controlled trial. Lancet. 2018; 391(10128):1367-1377.
8. American Diabetes Association. 7. Diabetes technology: Standards of Medical Care in Diabetes. Diabetes Care 2022 Jan; 45 (Supplement 1): S97-S112. https://doi.org/10.2337/dc22-S007**.** Accessed December 9, 2022.
9. Shatlin S, Phillip M. Hypoglycemia in type 1 diabetes: A still unresolved problem in the era of insulin analogs and pump therapy. Diabetes Care; 2008 Feb; 31(supplement 2): S121-S124. Available from: https://care.diabetesjournals.org/content/31/Supplement_2/S121.
10. Diabetes Control and Complications Trial Research Group (DCCT). Effect of intensive diabetes treatment on the development and progression of long-term complications in adolescents with insulin-dependent diabetes mellitus: Diabetes Control and Complications Trial. J of Pediatr. 1994; 125(2):177-188.
11. Feig DS, Donovan LE, Corcoy R, et.al. Continuous glucose monitoring in pregnant women with type 1 diabetes (CONCEPTT): a multicentre international randomised controlled trial. Lancet. 2017 Nov 25;390(10110):2347-2359. doi: 10.1016/S0140-6736(17)32400-5. Epub 2017 Sep 15. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5713979/.
12. Fonseca VA, Grunberger G, Anhalt H, et.al. Continuous glucose monitoring: A consensus conference of the American Association of Clinical Endocrinologists and American College of Endocrinology. Endocrine Practice. 2016; 22(8):1008-1021. Available from: https://journals.aace.com/doi/pdf/10.4158/EP161392.CS. Accessed December 9, 2022.
13. Heller SR. International Hypoglycaemia Study Group (IHSG): Glucose concentrations of less than 3.0 mmol/L (54 mg/dL) should be reported in clinical trials: a joint position statement of the American Diabetes Association and the European Association for the Study of Diabetes. Diabetes Care. 2017;40:155–157. Available from https://care.diabetesjournals.org/content/40/1/155.
14. DeSalvo DJ, Miller KM, Hermann JM, et al. Continuous glucose monitoring and glycemic control among youth with type 1 diabetes: International comparison from the T1D Exchange and DPV Initiative. Pediatr Diabetes. 2018;19:1271–1275. 10.1111/pedi.12711

Federal and state laws or requirements, contract language, and Plan utilization management programs or polices may take precedence over the application of this clinical criteria.