Executive Summary

Purpose: Ensure appropriate utilization and control of Continuous Glucose Monitors (CGMs)

Why Issue Selected: Continuous Glucose Monitors (CGMs) are devices which can monitor a patient's glucose levels in the interstitial fluid consistently (every 5 to 15 minutes) versus traditional self-monitoring of blood glucose which is patient initiated at prescribed intervals throughout the day. CGMs allow patients and providers to respond to changing glucose readings more quickly, provide alarms to indicate when glucose levels are outside of threshold levels, and can indicate trends in glucose levels over time. CGMs may also lead to modest improvements in A1C and intensification of glucose control without increasing the risk of hypoglycemia. In a consensus statement in 2016, the American Association of Clinical Endocrinologists found CGM use improves glycemic control, reduces hypoglycemia, and may reduce overall costs of diabetes management and called for expanding CGM coverage and utilization to improve the health outcomes of patients with diabetes. In their 2016 clinical guidelines, the Endocrine Society recommended CGMs for adult patients with Type 1 Diabetes who are willing and able to use the devices on a daily basis. MO HealthNet will cover Dexcom G6 products for select participants diagnosed with Type 1 Diabetes.

Program-Specific Information:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Cost per unit</th>
<th>Cost per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEXCOM G6 RECEIVER</td>
<td>$365.00</td>
<td>$365.00 WAC</td>
</tr>
<tr>
<td>DEXCOM G6 TRANSMITTER</td>
<td>$237.50</td>
<td>$950.00 WAC</td>
</tr>
<tr>
<td>DEXCOM G6 SENSOR</td>
<td>$111.67</td>
<td>$4,020.12 WAC</td>
</tr>
</tbody>
</table>

Type of Criteria: ☒ Appropriate Indications

Data Sources: ☒ Databases + Prescriber-Supplied

Setting & Population

- Drug class for review: Continuous Glucose Monitors (CGMs)
- Age range: All appropriate MO HealthNet participants
Approval Criteria

- Documentation of compliance to current therapy OR
- Documented diagnosis of Type 1 Diabetes in the past 2 years AND
- Participant requires insulin administration ≥ 3 times per day OR use of an insulin pump AND
- Documentation of consistent blood glucose testing at least 6 times per day in the past 3 months AND
- Documentation of at least one of the following:
  - Participant is unable to consistently and reliably identify hypoglycemic events (e.g. hypoglycemic unawareness) OR
  - Participant has a history of hypoglycemia (defined as blood glucose < 65 mg/dl for participants aged < 8 years and < 55 mg/dl for participants aged ≥ 8 years), including recurrent hypoglycemia or nocturnal hypoglycemia OR
  - Documentation of hospitalization or emergency room visit for conditions attributed to a hypoglycemic or hyperglycemia event in the past 6 months (excluding those associated with the initial diagnosis of diabetes) OR
  - Documentation of coexistent morbidity that poses an unusual challenge with concomitant hypoglycemia or hyperglycemia (e.g. uncontrolled epilepsy)
- Initial claims must be billed in the following order: 1st receiver, 2nd transmitter, and 3rd sensors

Denial Criteria

- Therapy will be denied if no approval criteria are met
- Claim exceeds quantity limitations:
  - 1 receiver every 310 days
  - 1 transmitter every 76 days
  - 3 sensors every 25 days

Required Documentation

<table>
<thead>
<tr>
<th>Laboratory Results:</th>
<th>Progress Notes:</th>
<th>MedWatch Form:</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>X</td>
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</table>

Disposition of Edit

Denial: Exception code “0682” (Clinical Edit)
Rule Type: N

Default Approval Period

1 year

References