

PROVIDER BULLETIN

Volume 42 Number 36

<http://dss.mo.gov/mhd/>

March 26, 2020

DIABETIC SUPPLIES - UPDATED

APPLIES TO: Pharmacy and DME providers and billers

EFFECTIVE DATE: April 1, 2020

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- **Continuous Glucose Monitoring Devices**
 - **Covered Diabetic Supplies**
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Continuous Glucose Monitoring Devices

The MO HealthNet Division will begin covering the Dexcom G6 Continuous Glucose Monitoring (CGM) System as the preferred CGM system on April 2, 2020. You can find the Clinical Edit criteria for CGM approval on our website at the following link: <https://dss.mo.gov/mhd/cs/pharmacy/pdf/cgms-clinical-edit.pdf>. CGMs will be reimbursed through the Pharmacy Program and must be submitted using the item's 11-digit National Drug Code (NDC) in the Point-of-Sale system or on a pharmacy claim form. Although CMGs are considered a pharmacy benefit, DME providers may continue to bill for GCMs and all diabetic testing supplies on a pharmacy claim form.

You can initiate a request for prior authorization by contacting the MO HealthNet Pharmacy Help Desk at (800) 392-8030 or by faxing the [Continuous Glucose Monitoring Device Prior Authorization](#) form to (573) 636-6470.

Note: Medicare covers CGMs for Medicare-eligible patients. Providers should bill Medicare according to Medicare established policies for their Medicare-eligible patients.

Covered Diabetic Supplies

In light of the COVID-19 pandemic, the MHD has extended coverage for Abbott Diabetes Care (ADC) products through 6-30-2020 to accommodate current patients using ADC products. Please note that ADC glucometers are not covered such that new patients or patients needing a new glucometer will need to switch to the Lifescan products. On and after 7/1/2020

all patients on an ADC product will need to be switched to a Lifescan glucometer and strips. You can find an updated list of covered diabetic supplies at the following link:
<https://dss.mo.gov/mhd/cs/pharmacy/pdf/diabetic-supplies-reference.pdf>.

To initiate a request for a non-reference diabetic supply product, fax the [Diabetic Supplies Prior Authorization](#) form to (573) 636-6470. Reviews for prior authorizations of non-reference products are on an individual patient basis and evaluated for medical necessity.

Note: Medicare reimburses diabetic supplies for Medicare-eligible patients. Providers are to bill Medicare according to Medicare established policies for diabetic supplies for their Medicare-eligible patients.

Provider Bulletins are available on the MO HealthNet Division (MHD) website at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD website at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

**Provider Communications Hotline
573-751-2896**