TUBED INSULIN PUMP CRITERIA

EFFECTIVE: April 1, 2021

APPLIES TO: DURABLE MEDICAL EQUIPMENT (DME) FEE-FOR-SERVICE PROVIDERS

- CRITERIA FOR TUBED INSULIN PUMP (E0784)

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Effective April 1, 2021, criteria for the tubed insulin pump (E0784) are changing. In order to meet criteria for this equipment, the participant must:

- Have a diagnosis of Diabetes Mellitus;
- Have been on a maintenance program for at least six (6) months involving at least three (3) injections of insulin per day and frequent self-adjustments of insulin dosage;
- Have performed glucose self-testing at least six (6) times per day on average or using a continuous glucose monitor (CGM) in the past (3) three months; and
- Have at least one (1) of the following symptoms or conditions:
  - Glycated hemoglobin level (HbA1c) greater than 7%;
  - A history of recurring hypoglycemia;
  - Wide fluctuations in blood glucose before mealtime;
  - A marked early morning increase in fasting blood sugar (dawn phenomenon-glucose level exceeds 200 mg/dl); or
  - A history of severe glycemic fluctuations.

Providers must obtain pre-certification by calling the DME Pre-Certification Hotline at 800-392-8030, option 2 or by using CyberAccess.

Please note, tubeless insulin pump requests should be made through the Pharmacy Program at 800-392-8030, option 3.
APPLICABILITY

Managed Care enrolled providers should contact their Managed Care Organization for questions regarding Durable Medical Equipment billing and reimbursement.

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