

Effective Date: 12/1/2020
Reviewed: 11/2020, 1/2021, 10/2021, 1/2022, 4/2023
Scope: Medicaid

Freestyle Libre Sensor and Reader Dexcom Reader, Transmitter and Sensor

POLICY

I. CRITERIA FOR APPROVAL

An authorization of 12 months may be granted if:

- A. Member is currently utilizing non basal insulin for the treatment of diabetes OR
- B. The member has Type 1 or Type 2 Diabetes Mellitus AND the member is at high risk of hypoglycemia, recurring episodes of hypoglycemia or hypoglycemia unawareness

II. QUANTITY LIMIT

- Freestyle Libre, Freestyle Libre 2 or 3 Sensors: 2 sensors per 28 days
 - Members are to keep the Freestyle Libre/Freestyle Libre 2 or 3 Sensor box as it has the information required for the replacement sensor.
 - If the sensor falls off, please call the manufacturer for a replacement.
- Freestyle Libre and Freestyle Libre 2Reader: 1 reader per 180 days
- Dexcom Reader: 1 per 365
- Dexcom Transmitter: 1 per 90 days
- Dexcom Sensor
 - G6: 3 sensors per 30 days
 - G5: 4 sensors per 28 days

III. COVERAGE DURATION

- 12 months