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| Effective Date: 2/1/2021 |
| Reviewed: 1/2021, 1/2022, 4/2023, 4/2024, 1/2025, 6/2025 |
| Scope: Medicaid |

Omnipod Starter Kits and Pods

POLICY

I. CRITERIA FOR APPROVAL

An authorization of 12 months may be granted if:

- A. The patient has diabetes requiring insulin management with multiple daily injections; AND
- B. The patient is self-testing glucose levels 4 or more times per day or is using Continuous Glucose Monitoring (CGM); AND
- C. The patient has experienced any of the following with the current diabetes regimen: inadequate glycemic control, recurrent hypoglycemia, wide fluctuations in blood glucose, dawn phenomenon with early morning fasting blood sugars frequently exceeding 200 mg/dL, or severe glycemic excursions.

II. QUANTITY LIMIT

- A. Omnipod Pods (e.g., Omnipod 5 Libre2 G6, 5 G7, G7G6, DASH, GO)
 - a. Quantity Limit of 15 pods per 30 days
- B. Omnipod Starter Kits
 - a. Quantity Limit of 1 kit per 30 days

III. COVERAGE DURATION

- 12 months