FreeStyle Libre

STANDARD WRITTEN ORDER

Fax this standard written order and patient's most recent medical records demonstrating coverage criteria is met to a DME supplier contracted with patient's primary insurance

Continuous Glucose Monitoring and Supplies

Patient Information

Patient Name: _____ Date of Birth: _____

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ ZIP: _____

Primary Insurance: _____ Primary Insurance Member ID: _____

Secondary Insurance: _____ Secondary Insurance Member ID: _____

Notes: _____

Diagnosis (ICD-10 code that supports medical necessity)[1]

☐ E10.9 ☐ E10.65 ☐ E10.649 ☐ E11.9 ☐ E11.8 ☐ E11.65 ☐ E11.649 ☐ Other _____

Reason(s) for prescribing continuous glucose monitor to improve patient's glycemic control[1,2]

☐ Insulin-treated Insulin type / brand: _____

☐ History of problematic hypoglycemia[1]

Order Detail

Duration of need: **LIFETIME (99)** - unless specified otherwise: _____

☐ **FreeStyle Libre 3 Plus sensor and FreeStyle Libre 3 reader**	☐ **FreeStyle Libre 2 Plus sensor and FreeStyle Libre 2 reader**
• Use **FreeStyle Libre 3 Plus sensor** and **FreeStyle Libre 3 reader** per manufacturer guidelines, in accordance with FDA indications for use • **Change FreeStyle Libre 3 Plus sensor every 15 days** • **Dispense** six sensors / 90 days	• Use **FreeStyle Libre 2 Plus sensor and FreeStyle Libre 2 reader** per manufacturer guidelines, in accordance with FDA indications for use • **Change FreeStyle Libre 2 Plus sensor every 15 days** • **Dispense** six sensors / 90 days
DISPENSE AS WRITTEN	

I certify that I am the physician identified in the "Physician Information" section and hereby attest that the medical necessity information is true, accurate, and complete to the best of my knowledge. I understand that any falsification, omission, or concealment of material fact may subject me to administrative, civil, or criminal liability. The patient/caregiver is capable and has successfully completed or will be trained on the proper use of the products prescribed on this order.

Physician Signature: _____ **Date:** _____

Physician Information

Physician Name: _____ NPI: _____

Phone: _____ Fax: _____

Address: _____ City: _____ State: _____ ZIP: _____

Office Contact: _____ Email: _____

Notes: _____

Medicare and other payor criteria may apply.

1. Policy Article A52464, Glucose Monitor. https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52464.
2. Local Coverage Determination (LCD) L33822, Glucose Monitors https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33822.

Important Safety Information Failure to use FreeStyle Libre systems as instructed in labeling may result in missing a severe low or high glucose event and/or making a treatment decision, resulting in injury. If glucose reading and alarms (if enabled) do not match symptoms or expectations, use a fingerstick value from a blood glucose meter for treatment decisions. Get medical attention when appropriate. Abbott Customer Service at 855-632-8658 or visit https://www.freestyleprovider.abbott/us-en/safety-information.html for safety info.

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E-Prescribing

E-prescribing enables a prescriber to electronically send an accurate, error-free and understandable prescription directly to a pharmacy [or DME supplier] from the point-of-care and is an important element in improving the quality of patient care.[1]

The FreeStyle Libre systems are available to order through DME suppliers using a variety of E-Prescribing platforms.

Some examples are:

Parachute Health

www.parachutehealth.com

DME scripts

DMEscripts.com

This listing of electronic prescribing platforms are in reverse alphabetical order and ADC has no preference on the E-Prescribing platform selected from the list.

The FreeStyle Libre systems may be available through other E-Prescribing platforms not listed here.

FreeStyle Libre Systems DME Suppliers

DME SUPPLIER	PHONE	FAX
AdaptHealth Diabetes	800-423-0896	866-779-8511
Advanced Diabetes Supply	866-976-9110	760-496-0234
Better Living Now / Rotech Company	800-854-5729	877-262-2179
Bridgewater Health Supplies	800-974-2055	877-297-5127
Byram Healthcare / Apria	800-775-4372	866-387-1127
CCS Medical	800-599-7521	800-557-8256
Edgepark Medical Supplies	844-619-4650	866-510-6583
Edwards Health Care Services	800-951-1725	502-657-0237
J&B Medical Supply	800-737-0045	800-737-0012
Quest Health Solutions	877-888-7050	866-422-5283
Shield Healthcare / Acentus (a Prism Solution)	800-845-5038	855-250-5813
Total Medical Supply	877-670-1120	877-670-1121
United States Medical Supply	877-270-6508	866-347-8544
US HealthLink	855-421-2732	407-440-8122

Last Updated 06/25.

Providers listed above include all DME suppliers who have contracted with ADC to acquire FreeStyle Libre family of products directly as of the "Last Updated" date. FreeStyle Libre family of products may be available through other suppliers not listed who acquire these products indirectly.

This listing of participating suppliers are in alphabetical order and ADC has no preference on the supplier selected from the list.

FreeStyle Libre

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1. Medicare E-Prescribing https://www.cms.gov/medicare/regulations-guidance/electronic-prescribing.

See page 1 for Important Safety Information.