



# Now widely covered by Medicare for patients managing diabetes using insulin\*<sup>1</sup>

On April 16, 2023, the Center for Medicare and Medicaid Services (CMS) expanded access to continuous glucose monitoring (CGM) for insulin-treated and non-insulin treated patients living with diabetes\*<sup>1</sup>.

The change broadens access\*<sup>1</sup> to life-changing CGM technology for people living with diabetes and simplifies the prescribing pathway for physicians\*<sup>1</sup>.



## WHAT CHANGED IN CMS CGM COVERAGE CRITERIA\*<sup>1</sup>

- 1 Removed requirement for multiple daily administrations of insulin. Now any insulin-treated patient may qualify\*
- 2 Added coverage for non-insulin treated patients with a history of problematic hypoglycemia
- 3 Removed requirement for frequent adjustment of insulin based on glucose testing results
- 4 Treating practitioners can now utilize Medicare-approved telehealth visits to assess patient's diabetes control and treatment plan

## DME SUPPLIERS FOR MEDICARE FEE FOR SERVICE

DME SUPPLIER	PHONE	FAX	DME SUPPLIER	PHONE	FAX
Advanced Diabetes Supply	866-416-8088	760-444-8771	J&B Medical Supply	800-737-0045	800-737-0012
Better Living Now, a Rotech Company	800-854-5729	800-654-7515	Mini Pharmacy	888-545-6464	800-280-2939
Bridgewater Health Supplies	888-763-5611	877-297-5127	Quest Health Solutions	877-888-7050	866-422-5283
Byram Healthcare /Apria	800-775-4372	877-702-2983	Solara Medical Supplies / AdaptHealth	844-381-8032	619-761-5839
CCS Medical	800-726-9811	800-860-4326	Total Medical Supply	877-670-1120	877-670-1121
Diabetes Management & Supplies / AdaptHealth	888-738-7929	504-407-2148	United States Medical Supply	877-840-8218	877-814-5461
Edgepark Medical Supplies	844-619-4650	866-510-6583	US HealthLink	855-421-2732	407-440-8122
Edwards Health Care Services	800-951-1725	502-657-0237			

Providers listed above include all DME suppliers who have contracted with Abbott Diabetes Care (ADC) to acquire FreeStyle Libre family of products directly. FreeStyle Libre family of products may be available through other DME 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.



\*Patients must meet Medicare eligibility coverage criteria.

1. Local Coverage Determination (LCD) L33822, Glucose Monitors, <https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?LCDId=33822>. Medicare coverage is available for the FreeStyle Libre 2 system if the FreeStyle Libre 2 reader is used to review glucose data on some days every month. Abbott provides this information as a courtesy, it is subject to change and interpretation. The customer is ultimately responsible for determining the appropriate codes, coverage, and payment policies for individual patients. Abbott does not guarantee third party coverage or payment for our products or reimburse customers for claims that are denied by third party payors. See Important Safety Information on last page.

## MEDICARE COVERAGE ELIGIBILITY CRITERIA\*1

The DME will work with you to ensure proper clinical necessity and documentation.

- 1 The beneficiary has diabetes mellitus; and,
- 2 The beneficiary's treating practitioner has concluded that the beneficiary (or beneficiary's caregiver) has sufficient training using the CGM prescribed as evidenced by providing a prescription; and,
- 3 The CGM is prescribed in accordance with its FDA indications for use; and,
- 4 The beneficiary for whom a CGM is being prescribed, to improve glycemic control, meets at least one of the criteria below:
  - a. The beneficiary is insulin-treated; or,
  - b. The beneficiary has a history of problematic hypoglycemia



Scan QR Code, or follow the link below, for more information on Policy Specific Documentation Requirements for problematic hypoglycemia found in the Glucose Monitor, Policy Article (A52464):  
<https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleId=52464>

- 5 Within six (6) months prior to ordering the CGM, the treating practitioner has an in-person or Medicare-approved telehealth visit with the beneficiary to evaluate their diabetes control and determined that criteria 1-4 above are met.

## MEDICARE ONGOING CGM COVERAGE CRITERIA\*1

- 1 Every six (6) months following the initial prescription of the CGM, the treating practitioner conducts an in-person or Medicare-approved telehealth visit with the beneficiary to document adherence to their CGM regimen and diabetes treatment plan.



**Customer Care Team 1-844-330-5535**

Available 7 days a week, 8AM to 8PM EST, excluding holidays

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Learn more at [Provider.FreeStyleLibre.us/Prescribe](https://Provider.FreeStyleLibre.us/Prescribe)

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Medicare coverage is available for the FreeStyle Libre 2 system if the FreeStyle Libre 2 reader is used to review glucose data on some days every month. Abbott provides this information as a courtesy, it is subject to change and interpretation. The customer is ultimately responsible for determining the appropriate codes, coverage, and payment policies for individual patients. Abbott does not guarantee third party coverage or payment for our products or reimburse customers for claims that are denied by third party payors.

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### Important Safety Information

Failure to use FreeStyle Libre 2 system 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 alarms and readings do not match symptoms or expectations, use a fingerstick value from a blood glucose meter for treatment decisions. Seek medical attention when appropriate or contact Abbott at 855-632-8658 or <https://www.FreeStyle.abbott/us-en/safety-information.html> for safety info.

The sensor housing, FreeStyle, Libre, and related brand marks are marks of Abbott. Other trademarks are the property of their respective owners.

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