AETNA BETTER HEALTH®
Coverage Policy/Guideline

Name:	Continuous Glucose Monitors	Page:	1 of 3
Effective Date:	9/16/2024	Last Review Date:	8/7/2024
Applies to:	☒New Jersey		

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Continuous Glucose Monitors under the patient's prescription drug benefit.

Description:

Continuous Glucose Monitors (CGMs) are devices that measure interstitial glucose (which correlates well with plasma glucose). CGMs monitor glucose levels continuously and either provide the user with automated alarms and alerts at specific glucose levels (real-time CGM) or only display glucose values when swiped by a reader or a smart phone that reveals the glucose levels (intermittently scanned CGM). CGM use facilitates modest improvements in glucose control as measured by A1c without increasing, and sometimes decreasing, the risk of hypoglycemia, thus facilitating safer intensification of glucose control.

According to a joint consensus statement by the American Association of Clinical Endocrinologists (AACE) and American College of Endocrinology (ACE), use of real-time CGM on a frequent basis in children and adults with type 1 diabetes (T1DM) is strongly supported by evidence from several randomized, controlled trials (RCTs). An international consensus on use of continuous glucose monitoring also recommends that CGM be considered in patients with T2DM who are using intensive insulin therapy who are not achieving glucose targets, especially if the patient is experiencing problematic hypoglycemia. Intensive insulin therapy is defined as multiple daily injections (MDI) or continuous subcutaneous administration through an insulin pump.

The American Diabetes Association (ADA) guidelines for diabetes care support use of CGMs in conjunction with multiple daily injections and continuous subcutaneous insulin infusions and other forms of insulin therapy as a tool to lower and/or maintain A1c levels and/or reduce hypoglycemia in adults and youth with diabetes. Patients less than 18 years of age with diabetes mellitus who are using an intensive insulin regimen will be considered for approval. For patients 18 years of age or older with diabetes mellitus using an intensive insulin regimen, coverage will be considered if the patient is not meeting glycemic targets or is experiencing hypoglycemia (including hypoglycemia awareness).

Applicable Drug List:

Dexcom G6
Dexcom G7
Freestyle Libre 2
Freestyle Libre 3

Freestyle Libre 14-day
Enlite
Guardian 3
Guardian 4
Eversense
Eversense XL

Policy/Guideline:

The requested drug will be covered with prior authorization when the following criteria are met:

- The patient has a diagnosis of diabetes mellitus

AND

- The patient is unable to take the required number of preferred formulary alternatives (2) for the given diagnosis, due to a trial and inadequate treatment response or intolerance, or a contraindication

  AND

  - The patient is using an intensive insulin regimen [Note: An intensive insulin regimen is defined as multiple daily injections (i.e., 3 or more injections per day) or insulin pump therapy]

  AND

  - The request is for a continuation of therapy and the patient has experienced improved glycemic control or decreased hypoglycemia episodes while using a continuous glucose monitor (CGM)

  OR

  - The request is for a continuation of therapy and the patient is being assessed every six months by the prescriber for adherence to their continuous glucose monitor (CGM) regimen and diabetes treatment plan

  OR

  - The patient is less than 18 years of age

  OR

  - The patient is not meeting glycemic targets OR the patient is experiencing hypoglycemia (including hypoglycemia unawareness)

OR

- The patient has a diagnosis of glycogen storage disease

Approval Duration and Quantity Restrictions:

Approval: 12 months

Quantity Level Limit:

Sensors

- Dexcom G6 sensors: 3 per 30 days
- Dexcom G7 sensors: 3 per 30 days
- Enlite sensors: 5 per 30 days
- Freestyle Libre 2 sensors: 2 per 28 days
- Freestyle Libre 3 sensors: 2 per 28 days
- Freestyle Libre 14-day sensors: 2 per 28 days
- Guardian 3 sensors: 5 per 28 days
- Guardian 4 sensors: 5 per 28 days
- Eversense sensors: 1 per 90 days
- Eversense XL sensors: 1 per 180 days

Transmitters

- Dexcom G6 transmitter: 1 per 90 days

Readers

- FreeStyle Libre 14 & FreeStyle Libre 2: 1 reader per year

References:

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3. Blonde L, Umpierrez GE, Reddy SS et. al. American Association of Clinical Endocrinology Clinical Practice Guideline: Developing a Diabetes Mellitus Comprehensive Care Plan – 2022 Update. *Endocr Pract.* 2022; 28(10):923-1049.
4. Danne T, Nimri R, Battelino T, et al. International Consensus on Use of Continuous Glucose Monitoring. *Diabetes Care.* 2017;40(12):1631-1640.
5. Centers for Medicare and Medicaid. Local Coverage Determination (LCD) for Glucose Monitors (L33882); Revision Effective Date 01/01/2023. Available at: https://www.cms.gov/medicare-coverage-database/view/lcd.aspx?lcdid=33822&ver=64&=.Accessed March 13, 2024.
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