

## **CLINICIAN CHECKLIST FOR GLUCOSE MONITORS AND RELATED SUPPLIES**

### **Policy References:**

- [Local Coverage Determination \(LCD\) \(L33822\)](#)
- [Policy Article \(A52464\)](#)

**Documentation References:** [Standard Documentation Requirements Policy Article \(A55426\)](#)

The treating clinician must complete the following items:

[Standard Written Order \(SWO\)](#)

Medical records as noted below

### **Medical Documentation**

#### **Blood Glucose Monitor and Related Supplies**

1. Beneficiary has diabetes; **and**
2. Beneficiary or caregiver has been trained on the device being prescribed.

#### **Testing more than once a day for non-insulin or more than three times a day for insulin treated:**

Criterion 1 and 2 above have been met; **and**

An in-person visit with the beneficiary to evaluate diabetes control and their need for the specific quantity of supplies prescribed; **and**

Every six months verify and document beneficiary's adherence to testing regime.