900 42nd Street South
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Glucose Monitors and Supplies

Dear Clinician,

Please note that this article is only intended to be a general summary. It is not intended to take the place of the written law, regulations, or national or local coverage determinations. Please refer to the Glucose Monitors LCD and Policy Article (L33822) for further information on Medicare coverage, documentation requirements, and orders which may be reviewed at the CMS Medicare Coverage Database at: https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx.

The following information is intended to provide you with guidance on Medicare's coverage and documentation requirements for blood glucose monitors (BGMs) and testing supplies.

The quantity of test strips and lancets that are covered, if the basic criterion above is met, is shown below.

Treatment regimen	Basic coverage Test strips and lancets
Insulin treated	300 per 3 months
Non-insulin treated	100 per 3 months

- Additional quantities of test strips can be covered if they are documented to be medically necessary – as outlined below.
- Coverage is also provided for a lancing device, calibration solution, and replacement batteries.

MEDICAL NECESSITY DOCUMENTATION

CMS expects that clinician records will reflect the care provided to the patient including evidence of the medical necessity for the prescribed frequency of testing. You are not required to fill out additional forms from suppliers or to provide additional information to suppliers unless specifically requested of the supplier by the DME MAC.

The face-to-face examination must document that the patient was evaluated and/or treated for a condition that supports the need for the item(s) of DME ordered. Both the written order and the face-to-face examination must be provided to the supplier before they can dispense the glucose monitor to the patient.

It is critical that the patient's medical record demonstrates the medical necessity for glucose testing supplies, which includes:

- Diagnosis
- Treatment regimen (insulin treated versus non-insulin treated)
- Basic coverage criteria for the BGM and any related supplies; and,
- Evidence of the patient's use at this frequency

For quantities of supplies that exceed the limits specified in the LCD, there must be:

- Documentation by the clinician in the patient's medical record of the necessity for the higher frequency of testing, which may include some of the following elements:
    - Names, dosages, and frequency of administration of medications used to treat the diabetes;
    - Frequency and severity of symptoms related to hyperglycemia and/or hypoglycemia;
    - Review of patient-maintained log of glucose testing values;
        - Logs of self-testing values including the date, time, and results;
        - Information about medication dosage adjustments related to the results is also helpful;
    - Changes in the patient's treatment regimen as a result of glucose testing results review;
    - Dosage adjustments that the patient should make on their own based on self-testing results;
    - Laboratory tests indicating level of glycemic control (e.g., hemoglobin A1C);
    - Other therapeutic interventions and results.

Not every patient's medical record will contain all of these elements; however, there must be enough information in the patient's medical record to support the medical necessity for the quantity of item(s) ordered and dispensed.

ORDERS

For initial dispensing of a standard BGM (code E0607), you must provide a Five Element Order (5EO), which must be received by the supplier prior to dispensing the item to your patient.

Also note that someone other than the physician/practitioner may complete the Detailed Written Order (DWO) of the item unless statute, manual instructions, the contractor's LCD or policy articles specify otherwise. However, the prescribing physician/practitioner must review the content and sign and date the document.

Note: A new order for diabetic testing supplies is required only if:

- there is a change in the frequency of testing,
- when replacing a BGM, or
- there is a change in supplier.

Note: If the supplier provides you with a prepared "written order" for your signature and date, you should inspect this document carefully. Suppliers must not add unrelated items to the detailed written order, whether requested by the patient or not, in the absence of your explicit approval.

Sincerely,

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