

Continuous Glucose Monitoring Prior Authorization Criteria

Products: Dexcom and Freestyle Libre

Effective Date: January 1, 2024

Prior Authorization Criteria for Approval

1. The patient has diabetes mellitus
AND
2. One of the following:
 - a. On insulin therapy or
 - b. If not on insulin, history of problematic hypoglycemia with documentation of one of the following:
 - i. Recurrent (more than one) level 2 hypoglycemic events (glucose <54mg/dL (3.0mmol/L)) that persist despite multiple (more than one) attempts to adjust medication(s) and/or modify the diabetes treatment plan
 - OR
 - ii. A history of one level 3 hypoglycemic event (glucose <54mg/dL (3.0mmol/L)) characterized by altered mental and/or physical state requiring third-party assistance for treatment of hypoglycemia

Length of therapy approved: 12 months

References:

- [LCD - Glucose Monitors \(L33822\)](#) (cms.gov)
- [Article - Glucose Monitor - Policy Article \(A52464\)](#) (cms.gov)

Approval and Revision History:

November 21, 2023: Reviewed and approved by Utilization Management