

Medical Supplies Update: Updates to Diabetic Blood Glucose Test Strips and Lancets Quantity Limits, Effective July 1, 2023

June 1, 2023

What Prescribers and Pharmacy Providers Need to Know

Effective July 1, 2023, diabetic lancets and blood glucose test strips will be updated for:

- Days supply from 90 to 100; and,
- Documentation of insulin user or non-insulin user,
- Quantity restrictions:

Code I restriction, diagnosis of diabetes; and,

- For a beneficiary using insulin:
 - Documentation by the provider on the prescription the beneficiary is using insulin;
 and,
 - Limited to up to six per day of blood glucose test strips and up to six per day of lancets; and,

A maximum of up to 600 (612 if using the Accu-Chek® Fastclix Lancets) of each product in 100 days.

- For a beneficiary not using insulin:
 - Documentation by the provider on the prescription the beneficiary is not using insulin;
 and,
 - Limited to one per day of blood glucose test strips and one per day of lancets; and,

A maximum of up to 100 of each product in 100 days.

A prior authorization (PA) showing medical necessity is required for quantities over the published allowances or non-diabetic diagnoses. Providers must include on the initial PA request:

- Diagnosis; and
- Date of most recent face-to-face prescriber meeting (within six months); and
- Prescriber documentation of adherence to the high utilization testing regimen; and
- Most recent (within six months) A1C percentage and target A1C percent; and
- Justification for high utilization of testing.

No changes are made to urine glucose test strips, ketone test strips, or concurrent continuous glucose monitoring (CGM) use with test strip and lancet requests.

Additional prescription requirements must be met. Refer to the *Diabetic Supplies – Test Strips* and *Lancets* section of the <u>Medi-Cal Rx Provider Manual</u> for more information. Refer to the <u>List of Contracted Diabetic Test Strips and Lancets</u> for currently covered products. Board of Pharmacy prescription regulations apply. Code I requirements and prescription documentation requirements are subject to the post-payment claims audit process. Should the Department of Health Care Services (DHCS) determine, by audit or other investigation, that excessive services, billings, or abuse have occurred by a provider, restrictions could occur. Refer to the *Provider Procedure/Drug Code Limitation (P/DCL)* section of the <u>Medi-Cal Rx Provider Manual</u> for details.

Contact Information

You can call the Medi-Cal Rx Customer Service Center (CSC) at 1-800-977-2273, which is available 24 hours a day, 7 days a week, 365 days per year.

For other questions, email Medi-Cal Rx Education & Outreach at MediCalRxEducationOutreach@magellanhealth.com.