



**BlueCross BlueShield
of Alabama**

Glucose Test Strips/Disks/ Meters Step Therapy Program Summary

For Commercial, GenPlus and Health Insurance Marketplace preferred products are Ascensia products.

Quantity limits are dictated through benefit design and are not included in this program.

OBJECTIVE

The intent of the Glucose Test Strips/Disks and Meters Step Therapy program is to encourage the use of cost-effective preferred test strip/disk and meter products before the more expensive nonpreferred products. (Continuous blood glucose monitors are not included in this program.) The review process will accommodate for the use of nonpreferred test strip/disk or meter products when the preferred glucose test strips/disks or meters cannot be used due to patient inability to use them accurately, or special requirements such as the use of an insulin pump (not accommodated with a preferred glucose test strip/disk or meter), visual impairment, or other physical or mental disability. Requests for nonpreferred products will be reviewed when patient specific documentation has been provided.

TARGET AGENTS

All nonpreferred Glucose Test Strips/Disks and Meters (as determined by client; inclusion of meters in step therapy program will be dependent on client/plan benefit design; continuous blood glucose monitors are not included in this program. Please note: Requests for test strips/disks should apply all requirements towards checking test strips/disks use. Requests for meters should apply all requirements towards checking meter use.)

PRIOR AUTHORIZATION CRITERIA FOR APPROVAL

A **nonpreferred glucose test strip/disk or meter product** (as determined by client) will be approved when **ONE** of the following is met:

1. The patient's medication history includes use of any preferred glucose test strip/disk or meter product in the past 90 days
OR
2. ONE of the following:
 - a. Patient has visual impairment
OR
 - b. Patient uses an insulin pump that is not accommodated with a preferred glucose test strip/disk or meter
OR
 - c. Patient has a physical or a mental disability

Length of approval: 12 months

This pharmacy policy is not an authorization, certification, explanation of benefits or a contract. Eligibility and benefits are determined on a case-by-case basis according to the terms of the member's plan in effect as of the date services are rendered. All pharmacy policies are based on (i) information in FDA approved package inserts (and black box warning, alerts, or other information disseminated by the FDA as applicable); (ii) research of current medical and pharmacy literature; and/or (iii) review of common medical practices in the treatment and diagnosis of disease as of the date hereof. Physicians and other providers are solely responsible for all aspects of medical care and treatment, including the type, quality, and levels of care and treatment.

The purpose of Blue Cross and Blue Shield of Alabama's pharmacy policies are to provide a guide to coverage. Pharmacy policies are not intended to dictate to physicians how to practice medicine. Physicians should exercise their medical judgment in providing the care they feel is most appropriate for their patients.

Neither this policy, nor the successful adjudication of a pharmacy claim, is guarantee of payment.

INDICATIONS AND DOSAGE¹

Glucose Test Strips/Disks and appropriate meters are indicated to be used for quantitatively measuring glucose in indicated blood samples. Strips/disks and associated meters are intended for use outside the body by people with diabetes for self monitoring of blood glucose (SMBG) at home and healthcare professionals in the clinical setting, as an aid to monitor the effectiveness of diabetes control.

NOTE: This table is not inclusive of all available diabetic test strips or disks.

Available Brand Products	Generic	Dosage Form
Acura [®] products Accu-Chek [®] products Advocate [®] products Bayer [®] products Control AST [®] products EasyGluco [®] products FreeStyle [®] products Glucocard [®] products Infinity [®] products Nova Max [®] products One Touch [®] products Precision [®] products Prodigy [®] products ReliOn [®] products Sidekick [®] products TrueTest [®] products TrueTrack [®] products WaveSense [®] products	Blood glucose test strip, Blood glucose test meter	Test strip Meter
Accu-chek [®] Compact Drums Ascensia [®] AutoDisc Bayer [®] Breeze	Blood glucose test disk	Test disk

CLINICAL RATIONALE

Although there are differences in capabilities and features among blood glucose meters (meter size, time to obtain results, memory size, blood sample size requirement), all meters work by measuring blood glucose levels. The use of blood glucose test strips or disks is meter-dependent. Patients must use the type of test strip or disk specified by the meter in order to correctly operate the meter and obtain results. Because patients may have different needs for SMBG, certain meters are designed to accommodate patients with special needs such as visual impairment and physical or mental limitations.

For additional clinical information see the Prime Therapeutics Formulary Chapter 15.3: Glucose Meters/Strips.

REFERENCES

3. Blood Glucose Meter Chart. American Diabetes Association.
<http://main.diabetes.org/dforg/pdfs/2016/2016-cg-meters-chart.pdf> Blood Glucose Accessed January 2018

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