

	
AETNA BETTER HEALTH® Coverage Policy/Guideline	
Name: Continuous Glucose Monitors	Page: 1 of 2
Effective Date: 2/3/2025	Last Review Date: 11/5/2024; 1/2025
Applies to: ☐ Illinois ☒ Virginia ☒ Maryland ☐ Michigan ☒ Pennsylvania Kids ☒ Florida Kids ☒ New Jersey	

Intent:

The intent of this policy/guideline is to provide information to the prescribing practitioner outlining the coverage criteria for Continuous Glucose Monitors under the patient's prescription drug benefit.

Applicable Drug List:

Preferred Agents:

Dexcom (All Products)

Non-Preferred Agents:

Enlite (All Products)

Eversense (All Products)

Freestyle Libre (All Products)

Guardian (All Products)

Policy/Guideline:

The patient is unable to take the preferred Dexcom product, due to a trial and inadequate treatment response or intolerance, or a contraindication.

Diabetes Mellitus

Authorization may be granted for the requested continuous glucose monitor and associated accessories for a diagnosis of diabetes mellitus when ONE of the following criteria are met:

- The patient is using multiple daily insulin injections (MDI) or continuous subcutaneous insulin infusion (CSII).
- The patient is using basal insulin

Glycogen Storage Disease

Authorization may be granted for the requested continuous glucose monitor and associated accessories for a diagnosis of glycogen storage disease.

Approval Duration and Quantity Restrictions:

Approval: 12 months

Quantity Level Limit:



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Sensors

- Dexcom sensors: 3 per 30 days
- Freestyle Libre sensors: 2 per 28 days
- Enlite: 5 per 30 days
- Guardian sensors: 5 per 28 days
- Eversense sensors: 1 per 90 days
- Eversense XL sensors: 1 per 180 days
- Eversense 365: 1 per 365 days

Transmitters

- Dexcom G6 transmitter: 1 per 90 days

Readers

- FreeStyle Libre 14 & FreeStyle Libre 2: 1 reader per year

References:

1. American Diabetes Association, Standards of Care in Diabetes – 2024. Diabetes Care. 2024;47(Suppl. 1):S1-S321.
2. Grunberger G, Sherr J, Allende M, et al. American Association of Clinical Endocrinology Clinical Practice Guideline: The Use of Advanced Technology in the Management of Persons with Diabetes Mellitus. Endocr Pract. 2021;27(6):505-537.
3. Blonde L, Umpierrez GE, Reddy SS et. al. American Association of Clinical Endocrinology Clinical Practice Guideline: Developing a Diabetes Mellitus Comprehensive Care Plan – 2022 Update. Endocr Pract. 2022; 28(10):923-1049.
4. Kaiser N, Gautschi M, Bosanka L, et al. Glycemic control and complications in glycogen storage disease type I: Results from the Swiss registry. Mol Genet Metab. 2019;126(4):355-361.
5. Herbert M, Pendyal S, Rairkar M, et al. Role of continuous glucose monitoring in the management of glycogen storage disorders. J Inherit Metab Dis. 2018;41(6):917-927.
6. White FJ, Jones SA. The use of continuous glucose monitoring in the practical management of glycogen storage disorders. J Inherit Metab Dis. 2011;34(3):631-642.
7. Kasapkara CS, Cinasal Demir G, Hasanoglu A, et al. Continuous glucose monitoring in children with glycogen storage disease type I. Eur J Clin Nutr. 2014;68(1):101-105.
8. National Organization for Rare Disorders. Glycogen Storage Disease Type I. Available at: <https://rarediseases.org/rare-diseases/glycogen-storage-disease-type-i/>. Accessed March 17, 2024.