Covered Diabetes Meters and Testing Supplies

Blood glucose meters, test strips, and other diabetes testing supplies are covered under Medicare Part B when prescribed by a healthcare provider. A valid prescription is required for coverage. Below is a list of the preferred blood glucose monitoring products available through an in-network pharmacy. The National Reimbursement Code (NRC) can assist in accurately identifying the covered products. Formulary restrictions, such as Prior Authorization or Quantity Limits, may apply. All lancets and lancing devices by any manufacturer are covered.

Blood Glucose Meters

Product Name	***NRC #***	***Formulary Restriction***
Accu-Chek Guide Meter	65702-0729-10	Quantity Limit of 1 kit per 365 days (1 per calendar year)
Accu-Chek Guide Me Meter	65702-0731-10	
True Metrix Meter	56151-1470-02	
True Metrix Air Meter	56151-1490-02	
Relion True Metrix Air Meter	56151-1491-02	

Test Strips

Product Name	***NRC #***	***Formulary Restriction***
Accu-Chek Guide Test Strips (50-count)	65702-0701-95	Quantity Limit of 4 strips per day (e.g. 100 strips per 25 days)
Accu-Chek Guide Test Strips (50-count)	65702-0711-10	
Accu-Chek Guide Test Strips (50-count)	65702-0719-10	
Accu-Chek Guide Test Strips (100-count)	65702-0712-10	
True Metrix Test Strips (25-count)	56151-1460-03	
True Metrix Test Strips (50-count)	56151-1460-04	
True Metrix Test Strips (100-count)	56151-1460-01	
Relion True Metrix Test Strips (50-count)	56151-1461-04	
Relion True Metrix Test Strips (100-count)	56151-1461-01	

Continuous Glucose Monitoring (CGM)

Product Description	*NRC #*	*Formulary Restriction*
Dexcom G6 Receiver	08627-0091-11	Prior Authorization Required
Dexcom G6 Transmitter	08627-0016-01	
Dexcom G6 Sensor	08627-0053-03	
Dexcom G7 Receiver	08627-0078-01	
Dexcom G7 Sensor	08627-0077-01	
Dexcom G7 15 Day Sensor	08627-0079-01	
FreeStyle Libre 2 Reader	57599-0803-00	
FreeStyle Libre 2 Plus Sensor	57599-0835-00	
FreeStyle Libre 3 Reader	57599-0820-00	
FreeStyle Libre 3 Plus Sensor	57599-0844-00	
FreeStyle Libre 14 Day Reader	57599-0002-00	
FreeStyle Libre 14 Day Sensor	57599-0001-01	

If you use diabetic testing supplies that are not preferred by the plan, speak with your doctor to get a new prescription or to request prior authorization for a non-preferred blood glucose monitor and test strips.

Coverage of diabetes testing supplies can change. For more information on coverage, please refer to your Evidence of Coverage.

For benefit questions or to request a prior authorization, call Member Services at the number on your Member ID card. From October 1 to March 31, you can call us 7 days a week from 8 a.m. to 8 p.m. From April 1 to September 30, you can call us Monday through Friday from 8 a.m. to 8 p.m. A messaging system is used after hours, weekends, and on federal holidays.

H1032 This information is available for free in other languages. Please contact our Member Services number at 1-855-445-3578 (TTY: 711). From October 1 – March 31, hours are 8 a.m. to 8 p.m. From April 1 – September 30, hours are Monday to Friday, 8 a.m. to 8 p.m.

Spanish: Esta información está disponible de manera gratuita en otros idiomas. Comuníquese con nuestro número de Servicios para Miembros al 1-855-445-3578 (TTY: 711). Desde el 1 de Octubre hasta el 31 de Marzo, el horario es de 8 a.m. a 8 p.m. Desde el 1 de Abril hasta el 30 de Septiembre, el horario es de Lunes a Viernes, de 8 a.m. a 8 p.m.

Creole: Enfòmasyon sa a disponib gratis nan lòt lang. Tanpri kontakte nimewo Sèvis pou Manm nou yo nan 1-855-445-3578 (TTY: 711). Apati 1 Oktòb – 31 Mas, lè fonksyònman yo se 8 a.m. rive 8 p.m. Apati 1 Avril – 30 Septanm, lè fonksyònman yo se Lendi rive Vandredi, 8 a.m. rive 8 p.m.

H1032-250 This information is available for free in other languages. Please contact our Member Services number at 1-833-502-9414 (TTY: 711). From October 1 – March 31, hours are 8 a.m. to 8 p.m. From April 1 – September 30, hours are Monday to Friday, 8 a.m. to 8 p.m.

Spanish: Esta información está disponible de manera gratuita en otros idiomas. Comuníquese con nuestro número de Servicios para Miembros al 1-833-502-9414 (TTY: 711). Desde el 1 de Octubre hasta el 31 de Marzo, el horario es de 8 a.m. a 8 p.m. Desde el 1 de Abril hasta el 30 de Septiembre, el horario es de Lunes a Viernes, de 8 a.m. a 8 p.m.

Creole: Enfòmasyon sa a disponib gratis nan lòt lang. Tanpri kontakte nimewo Sèvis pou Manm nou yo nan 1-833-502-9414 (TTY: 711). Apati 1 Oktòb – 31 Mas, lè fonksyònman yo se 8 a.m. rive 8 p.m. Apati 1 Avril – 30 Septanm, lè fonksyònman yo se Lendi rive Vandredi, 8 a.m. rive 8 p.m.

S4802 “Wellcare” is issued by WellCare Prescription Insurance, Inc.

H0029 Washington residents: “Wellcare” is issued by Coordinated Care of Washington, Inc.

H5439 Washington residents: Health Net Life Insurance Company is contracted with Medicare for PPO plans. “Wellcare” is issued by Health Net Life Insurance Company.

H2491 Louisiana D-SNP members: As a Wellcare HMO D-SNP member, you have coverage from both Medicare and Medicaid. You receive your Medicare health care and prescription drug coverage through Wellcare and are also eligible to receive additional health care services and coverage through Louisiana Medicaid. Learn more about providers who participate in Louisiana Medicaid by visiting www.myplan.healthy.la.gov/en/find-provider or https://www.louisianahealthconnect.com. For detailed information about Louisiana Medicaid benefits, please visit the Medicaid website at https://ldh.la.gov/medicaid and select the “Learn about Medicaid Services” link. To request a written copy of our Medicaid Provider Directory, please contact us.

H0174 and H5294 Texas D-SNP members: As a Wellcare HMO D-SNP member, you have coverage for both Medicare and Medicaid. You will receive your Medicare health care and prescription drug benefits through Wellcare. You are also eligible to receive additional health care benefits through STAR+PLUS Medicaid. You can learn more about providers who participate in Wellcare and Medicaid by visiting https://www.wellcarefindaprovider.com/navigate-a-network.html. To request written copies of our Medicare and Medicaid Provider Directories, please contact us at [<H0174:> 1-833-444-9089 / <H5294:> 1-855-445-3556] (TTY: 711), or reach out to your STAR+PLUS Managed Care Organization (MCO).>

Language Assistance