

PHARMACY GUIDELINE – 17

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UNIVERSITY PHYSICIANS HEALTH PLANS

(Maricopa Health Plan)

PHARMACY REFERRAL GUIDELINE

BLOOD GLUCOSE MONITORING SUPPLIES

Standard Coverage:

- Accu-Chek® and TrueTrack® meter and blood glucose test strips are formulary
- Not requiring insulin therapy:
 - 100 strips and lancets every 3 months
- Requiring insulin therapy:
 - 100 strips and lancets every month

Exception Criteria:

- Not requiring insulin therapy:
 - During adjustment of medications, may receive up to 100 strips and lancets per month for 2 months only
 - If experiencing frequent episodes of hypoglycemia (>5 times weekly) despite education and regimen adjustment, may receive up to 200 strips and lancets every 3 months
- Requiring insulin therapy:
 - During adjustment of intensive insulin therapy (>3 injections per day of short-acting and long-acting insulin) or initiation of an insulin pump, may receive up to 200 strips and lancets per month for 2 months only
 - If receiving intensive insulin therapy (>3 injections per day of short-acting and long-acting insulin) or on an insulin pump, may receive 150 strips and lancet per month. Managing physician must submit plan and instructions for patient.
- Alternative amounts of blood glucose testing supplies may be requested by provider based on medical necessity.

Approved by the Pharmacy and Therapeutics Committee 11/02; Revised and approved by the Pharmacy and Therapeutics Committee 12/03, 9/08; Reviewed 12/05, 6/06, 1/08, 5/09;