

# Provider Newsflash

August 2024

### Reminder: CGM Codes and Usage

#### Purpose of this communication:

 To remind providers of guidelines regarding billing and usage of CGM (Continuous Glucose Monitors) and supply codes for Medicare Advantage and commercial members.

#### What do I need to know?

Please review the information below for billable CGM and supply codes:

Horizon and Florida Blue Members	
The following codes should be billed to CareCentrix	
HCPCS Code:	CMS DESCRIPTION
E2102	ADJUNCTIVE, NON-IMPLANTED CONTINUOUS GLUCOSE MONITOR OR RECEIVER
A4238	SUPPLY ALLOWANCE FOR ADJUNCTIVE, NON-IMPLANTED CONTINUOUS GLUCOSE MONITOR (CGM), INCLUDES ALL SUPPLIES AND ACCESSORIES, 1 MONTH SUPPLY = 1 UNIT OF SERVICE
E2103	NON-ADJUNCTIVE, NON-IMPLANTED CONTINUOUS GLUCOSE MONITOR OR RECEIVER
A4239	SUPPLY ALLOWANCE FOR NON-ADJUNCTIVE, NON-IMPLANTED CONTINUOUS GLUCOSE MONITOR (CGM), INCLUDES ALL SUPPLIES AND ACCESSORIES, 1 MONTH SUPPLY = 1 UNIT OF SERVICE
Not billable to CareCentrix (does not meet DME benefit category requirements)	
HCPCS Code:	CMS DESCRIPTION
A9276	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ONE UNIT = 1 DAY SUPPLY
A9277	TRANSMITTER; EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM
A9278	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH NON-DURABLE MEDICAL EQUIPMENT INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM

#### **Special Consideration for Florida Blue Medicare Advantage Members**

As <u>previously communicated</u>, if the adjunctive CGM (E2102) and insulin pump (E0784) are requested together, the services must be registered with CareCentrix together and share the same date of service. Then, only the initial 90-day adjunctive CGM supplies (A4238) can be added on with the CGM request. Subsequent refills must go through the member's retail pharmacy.

References: CMS Glucose Monitor – Policy Article



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#### **Additional CGM information:**

- Non-adjunctive CGMs, adjunctive CGMs, and all associated supplies are covered under the DME benefit when the request meets policy-indicated criteria.
- For more information on CMS guidance, we have listed several resources below:
  - o CMS MLN Fact Sheet "Medicare Coverage of Diabetes Supplies"
  - o Joint DME MAC and PDAC publication for CMS
  - o DME MAC Noridian article regarding CGMs

#### What do I need to do?

- Please ensure you are billing the correct CGM codes with their accompanying supply codes that fit the member's scenario.
- Providers must verify eligibility and benefits with the health plan prior to rendering any service, equipment, or supplies.
- Medical necessity must also be confirmed prior to each supply shipment. Providers must not ship
  supplies unless, in advance of delivery or shipment, you have verified with the patient or their
  treating physician that the patient needs additional supplies.