

## Hot Tip: Durable Medical Equipment Products

To ensure a smooth pharmacy experience, your Healthy Blue and Healthy Blue Care Together patients must meet specific requirements when using non-preferred durable medical equipment products. Consider prescribing preferred products whenever possible to help avoid additional steps or delays at the pharmacy. Clinical Criteria may need to be met for certain preferred products. Coverage should be verified by reviewing the Preferred Drug List on the Healthy Blue and Healthy Blue Care Together [provider website](#). The Preferred Drug List is subject to change quarterly at the discretion of the North Carolina Department of Health and Human Services.

Therapeutic Class	Covered Products	NDC	Quantity Limit <sup>2</sup>
Disposable insulin delivery devices	Omnipod Dash	08508200005	N/A
	Omnipod 5 G6 Pods (Gen 5)	08508300021	N/A
	Omnipod 5 G7 Pods (Gen 5)	08508300053	N/A
	Omnipod 5 G7G6 Pods (Gen 5)	08508300075	N/A
	Omnipod 5 G6 / Libre 2 Plus	08508300042	N/A
	Omnipod 5 Intro G6 / Libre 2 Plus Kit	08508300088	1 per year
	Omnipod 5 6 intro kit (Gen 5)	08508300001	1 per year
	Omnipod 5 G7 intro kit (Gen 5)	08508300050	1 per year
	Omnipod Dash intro kit (Gen 4)	08508200032	1 per year
	Omnipod GO 10 units/day	08508400010	N/A
	Omnipod GO 15 units/day	08508400015	N/A
	Omnipod GO 20 units/day	08508400020	N/A
	Omnipod GO 25 units/day	08508400025	N/A
	Omnipod GO 30 units/day	08508400030	N/A
	Omnipod GO 35 units/day	08508400035	N/A
	Omnipod GO 40 units/day	08508400040	N/A
Cequir Simplicity Patch	73108000008	8 per month	
Cequir Simplicity Inserter	73108000100	1 per month	
Continuous blood glucose system sensors <sup>1</sup>	Dexcom G6 sensor	08627005303	1 (3 units) per month
	Dexcom G7 sensor	08627007701	1 (3 units) per month
	Freestyle Libre 2 system sensor kit	57599080000	2 per month
	Freestyle Libre 3 system sensor kit	57599081800	2 per month
	Freestyle Libre 2 Plus sensor	57599083500	2 per month
	Freestyle Libre 3 Plus sensor	57599084400	2 per month
	Freestyle Libre 14 Day sensor 1-kit <sup>3</sup>	57599000101	2 per month

Healthy Blue and Healthy Blue Care Together are Medicaid plans offered by Blue Cross and Blue Shield of North Carolina. Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross Blue Shield Association. ® Marks of the Blue Cross Blue Shield Association. All other marks are the property of their respective owners.

Blue Cross and Blue Shield of North Carolina  
Hot Tip: Durable Medical Equipment Products

Therapeutic Class	Covered Products	NDC	Quantity Limit <sup>2</sup>
Continuous blood glucose system transmitters/receivers/ readers <sup>1</sup>	Dexcom G6 transmitter	08627001601	1 per 90 days
	Dexcom G6 receiver	08627009111	1 per year
	Dexcom G7 receiver	08627007801	1 per year
	Freestyle Libre 2 system reader	57599080300	1 per year
	Freestyle Libre 3 system reader	57599082000	1 per year
	Freestyle Libre 14 Day reader <sup>3</sup>	57599000200	1 per year
Footnotes:			
<sup>1</sup> Prior authorization is required for continuous glucose monitoring system products.			
<sup>2</sup> Quantities over this limit are not covered under the pharmacy benefit.			
<sup>3</sup> Product is nonpreferred; trial and failure of two preferred products is required.			

If you have questions regarding this Hot Tip, contact Provider Services at 844-594-5072 (Healthy Blue Provider Services) or 833-777-3698 (Healthy Blue Care Together Provider Services).