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**Date:** December 26, 2023

**To:** Providers ordering continuous glucose monitoring (CGM) devices

**From:** Nathan Roberts, Health and Professional Services Policy manager  
Medicaid Programs

**Subject:** Fee-for-service coverage of CGM devices effective January 1, 2024

Effective January 1, 2024, providers can order CGM devices for people with Type 2 diabetes or gestational diabetes who meet the coverage criteria in [Guideline Note 108 of the January 1, 2024 Prioritized List of Health Services](#).

- Oregon Health Authority (OHA) asks ordering providers to ensure all fee-for-service (open card) patients who qualify for a CGM device get their device through a local pharmacy instead of a durable medical equipment (DME) supplier, if possible.
- For fee-for-service (open card) members, OHA will require prior authorization of CGM devices through the Oregon Pharmacy Call Center. OHA expects to publish prior authorization criteria in January 2024.
- OHA will continue to accept Medicare crossover claims for CGM devices ordered through DME suppliers to align with Medicare requirements.

### Why is this happening?

This change supports CGM coverage changes in the [January 1, 2024 Prioritized List of Health Services](#). To learn more about this coverage see Guideline Note 108. Ordering through pharmacies will ensure timely review of fee-for-service authorization requests.

### What should you do?

- For most fee-for-service (open card) members, order CGM devices through pharmacies for qualifying individuals.
- For dually eligible (Medicare/Medicaid) individuals, order according to Medicare requirements.
- For coordinated care organization (CCO) members, contact the member's CCO.

### Questions?

If you have any questions about this announcement, contact Brandon Wells at [dmap.rxquestions@oha.oregon.gov](mailto:dmap.rxquestions@oha.oregon.gov).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.