Diabetes Benefit All OH Medicaid Managed Care Organizations 2022

All MCO Quality Limits on Non-CGM Diabetic Supplies

| Product | Unified Criteria |
|---|-------------------------------------|
| Blood Ketone Strips | QL: 100/30 days |
| Insulin Syringes (disposable) | QL: 7/day |
| Pen Needles | QL: 7/day (UPDL QL 612/102 days) |
| Alcohol Swabs | QL: 10/day |
| Blood Glucose Strips | QL: Noninsulin 2/day Insulin: 7/day |
| Blood Glucose Meters (Meter Brands-TruMatrix and One Touch) | QL: 1/720 days |

Unified Preferred Drug List (UPDL)

All MCOs have a UPDL- refer to the UPDL for medications. The UPDL can be accessed on the Ohio Department of Medicaid website (link below).

The Ohio Department of Medicaid implemented a Unified Preferred Drug List (UPDL) on January 1st, 2020 that encompasses the entire Medicaid population regardless of enrollment in Managed Care or Fee for Service (FFS).

Ohio Unified Preferred Drug List | pharmacy.medicaid.ohio.gov

Continuous Glucose Monitors (CGM)

CGM Device Coverage by Plan

| Managed Care Organization | Prior Authorization Required? | Quantity Limits on Supplies | <u>Covered Devices</u> |
|---------------------------|----------------------------------|--------------------------------|---|
| Medicaid Fee for Service | No | Yes | DexCom G6 AND FreeStyle Libre |
| Buckeye Health Plan | No | Yes | DexCom G6 AND FreeStyle Libre |
| CareSource | No | Yes | DexCom G6 AND FreeStyle Libre |
| Molina | No | Yes | DexCom G6 AND FreeStyle Libre |
| Anthem/Paramount | No | Yes | DexCom G6 AND FreeStyle Libre |
| United Healthcare | No | Yes | DexCom G6 AND FreeStyle Libre |













Diabetes Self-Management Education Covered by all Ohio Medicaid Managed Care Plans

| Summary of Diabetes Education | | | | |
|-------------------------------|---|--|--|--|
| | Diabetes Self-Management Education (DSME) | Medical Nutrition Therapy (MNT) | | |
| Description | "Ongoing process of facilitating the knowledge, skills, and ability necessary for diabetes self-care, and activities that assist with implementing and sustaining the behaviors needed to manage his or her condition on an ongoing basis, beyond or outside of formal self-management training." The ADA recommends four critical times to evaluate the need for DSME: at diagnosis, annually &/or when treatment targets are not met, when complicating factors develop, and when transitions of life/care occur. | Defined as a "nutrition-based treatment provided by a registered dietitian nutritionist." It includes "a nutrition diagnosis as well as therapeutic and counseling services to help manage diabetes. | | |
| Program components | Core Content including Diabetes pathophysiology and treatment options, and seven self-care behaviors: Healthy eating Physical activity Medication usage Monitoring and using patient health data Preventing, detecting, and treating acute and chronic complications Healthy coping with psychosocial issues and concerns Problem solving | An intensive comprehensive service: Involves in-depth individualized nutrition assessment Relies heavily on follow-up to provide repeated reinforcement to aid with behavior change Establishes goals, a care plan, and interventions Plans for follow-up over multiple visits to assist with behavioral and lifestyle changes relative to each individual's nutrition problems and medical condition or disease | | |
| Program Benefits | Improves health outcomes as patient maintains better control of A1c | Focuses on nutrition component for diabetes and A1c management | | |
| Frequency | Initial year: Up to 10 hours of initial training within a continuous 12-month period; or Subsequent years: Up to 2 hours of follow-up training each year after the initial year *Telehealth DSME is covered | Initial year: Up to 3 hours Subsequent years: 2 hours | | |
| Provided by | Diabetes educators: Medicaid provider, ADA-recognized and/or ADCES-accredited DSME Program. Refer to member's Managed Care Plan for local network providers. | Registered dietitians or nutritional professionals Go to the Academy of Nutrition and Dietetics website to find a local registered dietician: https://www.eatright.org/find-an-expert | | |
| Codes | Individual: G0108 Group (2 or more): G0109 | Individual: 97802 (Initial) and 97803 (subsequent) Group: 97804 | | |

Sources: 2017 National Standards for DSME; American Association of Diabetes Educators; Medicare reimbursement; 2021 ADA Standards of Care in Diabetes; CDC

Managed Care Plan Contacts for DSME/MNT

| Managed Care Plan | DSME Lead | Email Address | |
|----------------------------|--|----------------------------------|--|
| Aetna | Michelle Wanish QM Manager | ···· | |
| Buckeye Health Plan | Osa Ojo, DNP, FNP-BC, APRN, CCM Manager, Case Management OOJO@CENTENE.COM | | |
| CareSource | Erin Brigham, MPH, CPHQ Senior Director, Quality Improvement | Erin.Brigham@caresource.com | |
| Molina | Ann Fogarty Case Manager II, HealthCare Services | Ann.Fogarty@MolinaHealthCare.Com | |
| Anthem/Paramount Advantage | Andrew Mariani Quality Improvement Team Lead Andrew.Mariani@ProMedica.org | | |
| UnitedHealthcare | Samantha Froimson Diabetes Population Health QI Lead | Samantha.froimson@uhc.com_ | |











