



Advanced Health is pleased to announce, effective August 1, 2022, we have removed the prior authorization requirement for the diabetic testing supplies and incontinence supplies listed on the next two pages.

Attached, you will find the maximum quantities of diabetic testing supplies and incontinence supplies that can be dispensed **monthly**, for a qualifying member, without prior authorization. Any request above the allowed limits will be forwarded to Advanced Health for review and decision.

Please contact Kathy Hill @ (541) 269-4563 with any questions related to these changes.



Diabetic Testing Supply Limits

For quantities above the allowable limits listed below, prior authorization will be required.

Orders require: Above the line ICD 10 code(s), length of need, Provider signature, date, specific DME product, number of times testing and injecting daily with the correct delivery system.

Documentation Required: Physician review of blood sugar log, current A1C lab, current medication list and chart notes supporting the request.

Members on any diabetic medication are allowed:

Supply	Quantity allowed	Unit size
Test strips	100 per month	50 strips per box
Lancets	100 per month	100 lancets per box
Alcohol wipes – For testing	100 per month	100 alcohol wipes per box
Insulin syringes with needles – For use with insulin vials	200 per month	100 syringes with needles attached per box
Pen needles – For use with insulin pens	200 per month	100 pen needles per box

Members with Gestational Diabetes (through EDD plus 60 days postpartum) are allowed:

Supply	Quantity allowed	Unit size
Test strips	150 per month	50 strips per box
Lancets	200 per month	100 lancets per box
Alcohol wipes - For testing	200 per month	100 alcohol wipes per box
Insulin syringes with needles – For use with insulin vials	200 per month	100 syringes with needles attached per box
Pen needles – For use with insulin pens	200 per month	100 pen needles

Members with continuous glucose monitors (CGM) do not qualify for monthly testing supplies but may receive 100 strips and lancets per year for calibration.



INCONTINENCE SUPPLY LIMITS

For quantities above the allowable limits listed below, prior authorization will be required.

Orders require: Above the line ICD10 code(s), length of need, Provider signature, date, and specific DME products with quantities.

Documentation Required: Chart notes supporting the medical need for the products and quantities requested.

Supply	Quantity allowed
Briefs Pullups pantyliners	Any combination; not to exceed 200 per month
Washable underpads -OR- Disposable underpads (chux)	8 per year 100 per month
Gloves	200 per month