



Uniform Formulary Medical Necessity Criteria for Self Monitoring Blood Glucose Systems

Drug Class - Self monitoring blood glucose systems

Background - After evaluating the relative clinical and cost effectiveness of the Self monitoring blood glucose systems, the DoD P&T Committee has recommended that the following medications be designated as non-formulary under the Uniform Formulary. These recommendations have been approved by the Director, TMA.

Effective Date: 16 September 2009

- All test strips EXCEPT Accu-Chek Aviva, Ascensia Contour, FreeStyle Lite, Precision Xtra, and TRUEtest.

Patients currently using a non-formulary Self Monitoring Blood Glucose System (test strip) may wish to ask their doctor to consider a formulary alternative.

Uniform Formulary Status, Cost Shares, and Therapeutic Alternatives for Self Monitoring Blood Glucose Systems^{1,2}

Uniform Formulary Status	Medication	Military Treatment Facilities (MTFs) cost share for up to a 90 day supply	Mail Order cost share for up to a 90 day supply	Retail Network cost share for up to a 30 day supply
Non-Formulary (Tier 3)	All test strips not listed as formulary below.	Not available ²	\$22	\$22
Formulary: Brand Name (Tier 2)	Accu-Chek Aviva, Ascensia Contour, FreeStyle Lite, Precision Xtra, and TRUEtest.	\$0	\$9	\$9
Formulary: Generic (Tier 1)	None	\$0	\$3	\$3
<p>1. Active duty copay always \$0 in all points of service for all three tiers; active duty service members may not fill prescriptions for a non-formulary medication unless it is determined to be medically necessary.</p> <p>2. MTFs will be able to fill non-formulary requests for non-formulary medications only if both of the following conditions are met: 1) a MTF provider writes the prescription, and 2) medical necessity is established for the non-formulary medication. MTFs may (but are not required to) fill a prescription for a non-formulary medication written by a non-MTF provider to whom the patient was referred, as long as medical necessity has been established.</p>				

Medical Necessity Criteria for Self monitoring blood glucose systems

The \$22 non-formulary cost share for Non-formulary Test Strips may be reduced to the \$9 formulary cost share IF one or more of the following criteria are met:

1. The patient reasonably would not be able to use a formulary blood glucose meter and strips appropriately or effectively instead of the requested blood glucose meter and formulary excluded strips.
2. The patient has a documented physical or mental health disability requiring a special monitor (e.g. visual impairment).
3. The patient is using the Medtronic Mini Med Paradigm insulin pump with the One Touch Ultra Link meter (One Touch Ultra test strips) or the patient is using the One Touch Ping insulin pump and One Touch Ping meter (One Touch Ultra test strips).
4. The patient is receiving peritoneal dialysis or the intravenous immune globulin (IVIG) preparation Octagam and the provider is concerned about the glucose dehydrogenase-pyrroloquinolinequinone interaction (GDH-PQQ).

Criteria recommended by the DoD Pharmacy & Therapeutics Committee at the February 2009 meeting & approved by the Director, TMA on 12 May 2009. For more information, please see the February 2009 [DoD P&T Committee minutes](#).

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