

Effective Date: 2/1/2021
Reviewed: 1/2021, 1/2022, 4/2023, 4/2024
Scope: Medicaid

**Omnipod Starter kit, Omnipod DASH
And Omnipod 5 G6 & Omnipod 5 G7**

POLICY

I. CRITERIA FOR APPROVAL

An authorization of 12 months may be granted if:

- A. The patient has diabetes requiring insulin management with multiple daily injections; AND
- B. The patient is self-testing glucose levels 4 or more times per day; AND
- C. The patient has experienced any of the following with the current diabetes regimen: inadequate glycemic control, recurrent hypoglycemia, wide fluctuations in blood glucose, dawn phenomenon with persistent severe early morning hyperglycemia, or severe glycemic excursions.

II. QUANTITY LIMIT

- A. Omnipod DASH and Omnipod 5 G6/Omnipod 5 G7
 - a. Quantity Limit of 15 pods per 30 days
- B. Omnipod Starter kits
 - a. Quantity Limit of 1 kit per 30 days

III. COVERAGE DURATION

- 12 months