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November is American Diabetes Month. Here are some FAQ's on what your plan covers for certain services if you are diagnosed with Diabetes.

Dear Patty,

Q: [How are Diabetic Testing Supplies covered under my Florida Blue Plan?](#)

A: The following Diabetic Testing Supplies are covered under your Pharmacy Benefits:

- Glucose Meter (\$0 copay)
[\(Bayer/Contour is the preferred brand.\)](#)
- Test Strips (\$0 copay)
- Lancets (\$0 copay)
- Needles (\$0 copay)
- Syringes (\$0 copay)
- Insulin for Self-Injections (\$10 Generic/\$35 Preferred Brand/\$60 Non-Preferred Brand at Walgreens Retail Pharmacy)

The following Diabetic Equipment/Supplies are covered under your Durable Medical Equipment (DME) medical benefits and require prior authorization:

- Insulin Pumps
- Insulin Pump Supplies (except for Insulin)
- Continuous Glucose Monitoring Devices (CGM)



Patty's Points



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Note: The ordering physician would need to contact the DME coordinator, CareCentrix at 1-877-561-9910 to submit the request for authorization.

Reminder: You may obtain Diabetic Testing Supplies and Generic Insulin at the My Health Onsite Health & Wellness Centers at no cost to you.

Q: I need to refill my insulin every month and it costs me \$35 copay each month. Does the District offer any other options?

A: Yes, the District offers an insulin savings program through True North Meds. You may get your insulin at \$0-\$10 copay. Please contact True North Meds at 1-844-681-8783 to inquire. Their fax number is 1-844-682-8783. ***(Please note: This is a District benefit offering.)***

Q: What is my copay for a Continuous Glucose Monitor (CGM)?

A: Continuous Glucose Monitors are covered under Durable Medical Equipment (DME) which is a medical benefit. Your copay will vary by plan. If you are enrolled on the HMO Basic or HMO premium plan, your copay is \$0 for an approved CGM. If you are enrolled on the BlueOptions PPO plan, the approved CGM is subject to the Deductible and Coinsurance.



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Q: I am diabetic and have foot pain. My doctor referred me to a podiatrist. The podiatrist gave me a script for shoe inserts. Are these covered under my plan?

A: Yes, they would be covered since you are diabetic. Otherwise, per the policy: “Expenses for arch supports, shoe inserts designed to effect conformational changes in the foot or foot alignment, orthopedic shoes, over-the-counter custom-made or built-up shoes, cast shoes, sneakers, ready-made compression hose or support hose, or similar type devices/appliances regardless of intended use are excluded under your plan.” ***The exception is therapeutic shoes (including inserts and/or modifications) for the treatment of severe diabetic foot disease.***

Your doctor will need to submit a request to CareCentrix. Their phone number is 1-877-561-9910. If authorized, the copay is \$0 under the HMO Basic or HMO Premium plan. Under the BlueOptions PPO plan, this benefit is subject to the Deductible and Coinsurance.

Q: I am diabetic and need to get my eyes checked for any retinal changes. Is this covered under my Florida Blue Medical Plan or my Davis Vision Plan?

A: Your Florida Blue medical plan covers eye injury and disease. Davis Vision covers routine eye care. You will need to consult with an ***in-network*** ophthalmologist. There is a \$50 specialist copay per visit under the HMO Premium and BlueOptions PPO Standard plans and a \$65 copay per visit under the HMO Basic Plan. ***(Please note: In-Network Specialist copays are increasing on all three medical plans effective January 1, 2023.)***